



MADISON COUNTY BOARD OF SUPERVISORS

JOSEPH J. PINARD

Chairman

MARK SCIMONE

County Administrator

EMILY C. BURNS

Clerk

138 N. Court St., PO Box 635

Wampsville, NY 13163

Phone: 315/366-2201

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Government Operations **Thursday, February 22, 2024 @ 10:30 AM** **Madison County BOS Chambers**

AGENDA

10:30 AM **Call Meeting to Order**

Approval of Minutes

- Approval of Meeting Minutes 1/25/2024

Purchasing:

1. Department Update
2. Joe W. - Enterprise Fleet Discussion

Board of Elections:

1. Department Update

County Administrator:

1. Compliance Officer Report

Information Technology:

1. Department Update

Human Resources:

Resolutions:

1. Re-Appointing Members to the Ethics Advisory Council
2. Amending the Corporate Compliance Plan and Certain Policies
3. Designating an Acting Director of Solid Waste Management
4. Resolution of Appreciation – Retiree Recognition
5. Amending the Wage Rates for Non-Represented Employees in Blue Collar Unit Job Titles Policy and Procedures
6. Amending the Madison County Vehicle Fleet Policy and Procedures

Other Committee Business

1. Discussion: Rules of the Board
2. Litigation - Executive Session
3. Executive Session - Personnel Matters
4. Executive Session - Salary Matters

Preferred Agenda

Next Meeting:

1. Next Meeting: March 28, 2024 Immediately Following FWM

Adjourn



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Government Operations

**Thursday, January 25, 2024 @ 10:30 AM
Chambers**

MINUTES

10:30 Call Meeting to Order AM

Committee Members Present: P. Walrod, T.J. Stokes, R. Vosburg, M. During and K. Reger; M. Cavanagh via zoom due to illness and E.A. Shwartz due to medical.

Other in attendance: J. Pinard – Chairman; L.A. Randall - Finance; T. Wayland Smith - CAO; C. Kennedy - Compliance; L. Winters - Purchasing; M. Felton- CAO; M. Roberts - Supervisor; L. Gormly - OEM Intern; D. Degear - OEM; J. Scroggs Intern - CAO; J. Herb - One Group; A. Brown - One Group; P. Lutwak - IT; L. Martino - BOE; S. Prieto - HR; R. Aylward - HR; R. Coe - PIO; R. Mascari – DA; S. Field - PIO; E. Burns - BOS; M. Scimone - CAO

Approval of Minutes

- Meeting Minutes 12.5.23

Motion by Rex Vosburg to Motion. Second by Mary Cavanagh. The motion was Passed.

Executive Session:

- Enter into Executive Session for medical, financial, credit or employment history of a particular person or corporation, or matters leading to the appointment, employment, promotion, demotion, discipline, suspension, dismissal or removal of a particular person or corporation.

10:58 AM Motion by Melissa During to Motion. Second by Rex Vosburg. The motion was Passed.

11:37 AM Exit Executive Session Motion by Rex Vosburg to Motion. Second by Melissa During. The motion Passed.

County Administrator:

1. One Group Presentation

One Group provided a handout of Madison County 2024 Property and Liability Insurance Cost Summary. This showed the actual cost of coverages for 2023

and what was budgeted versus the actual for 2024. The budgeted cost for insurances was an increase of 10.2. The actual increase was 8.8%.

This year the renewal went out to bid. There was an average increase of 30 - 60%. The Property premium is up based on market. Workers Comp rates went down, Health care costs go up and Cyber Liability prices spiked. Currently decreasing though.

PERMA is rated differently than normal workers comp and increased 5%, no more.

2. **Corporate Compliance** - Department Overview and Updates

In 2013 Corporate Compliance was established. In 2020 it was a full time position. They work on Compliance with HIPAA; 40 Policies brought to the board in 2021; worked with IT,

Onboarding - Neogov for New employee forms and training

- Contract and Video Recording Policy
- Worked on enhancing Corporate Compliance program.
- Network with Corporate Compliance Round Table and is chair of Compliance Committee that meets quarterly.
- General Training and education.
- Quarterly Newsletter
- Annual Risk and Effectiveness
- RFP Risk Assessment
- ADA Complaints and update website

M. Scimone, County Administrator stated that Christina has exceeded the expectations of the county.

Purchasing:

Current:

- Finishing up year-end requests
- 2024 is in full swing – 622 purchase orders have been converted so far for this year
- 2/1 we will be opening County Complex Sewer Bid
- 2/5 we will be releasing RFI for the Canalside Pocket Neighborhood
- 2/8 we have three Highway bids we will be opening
- 2/16 RFP – HIPAA Assessment will be due

Responsibilities:

The centralized purchasing office is comprised of the following services

- Train employees on our policy and procedures
- Contracts – ERP system
 - ✓ Review
 - ✓ Posting
- Enterprise Lease Fleet Management – along with the County Administrator and the Chairman
 - ✓ Ordering
 - ✓ Reporting
 - ✓ Review
 - ✓ Tracking

- ✓ Annual Budget Preparation
- Enforcing Federal Purchasing Regulations, as indicated in our policy
- Enforcing the NYS General Municipal Law, per our policy
- Grants - Without much cooperation from the departments on the needed documents that will help us purchase off grants within the grant guidelines. We do not receive the information that we need per the Purchasing Policy. We only know of a handful of grants and are trying our best to request as we see it is a grant purchase, but not all departments include grants in their requisitions.
 - ✓ Review of guidelines
 - ✓ Purchasing items correctly
 - ✓ Enforce purchasing requirements
- Insurance – mainly for bid and RFP contracts
 - ✓ Review
 - ✓ Tracking
- Prevailing Wage
 - ✓ Tracking
 - ✓ Ordering
 - ✓ Awarding
 - ✓ Collecting Certified Payrolls
 - ✓ Closing
- Annual review of the Purchasing Policy and Procedures
- Annual review of the Central Service printing fees for internal and external (ex. Office of the Aging, Towns, Villages and City)
- Printing Requests: Madison-Oneida BOCES, NYSID, etc. – This is for items that our Central Service Department cannot do. We do this service for the Towns, Villages and City, upon requests.
- Purchasing – part centralized and part decentralized – The transition to go from decentralized to centralized has not been the smoothest, as some departments requested to continue their purchasing themselves.
 - ❖ Centralized Departments – Mental Health, Pathways, Probation, Planning, Real Property, Human Resources, WIA, Veterans, and Assigned Counsel, Board of Supervisors, County Attorney's, Board of Elections, Compliance Office, Public Information Office, County Clerk, District Attorney, Finance, Social Services, Treasurers, Information Technology
 - ❖ Decentralized Departments – Larger Departments: Sheriffs, Highway, Emergency Management, Facilities, Public Health, Solid Waste,
- ✓ Obtaining quotes
- ✓ Requisition entry
- ✓ Bid Process
- ✓ RFP Process
- ✓ Request for Qualification Process
- ✓ Request for Information
- ✓ P-card payments for medical supplies, office supplies, furniture, and as-needed basis
- Purchasing Ticket System – the departments put in requests and we do them and track our time in the ticket.
 - ✓ Requisition Requests, Place Order
 - ✓ Change Orders
 - ✓ Vendors
 - ✓ Surplus
 - ✓ Prevailing Wage
 - ✓ Purchasing Approvals
 - ✓ Bid/RFP/Quote Request

- ✓ Miscellaneous Requests
- Surplus – departments, other municipalities
 - ✓ Q-Ware Requests
 - ✓ Tracking/Reporting
 - ✓ Disposal
 - ✓ Offerings
 - ✓ Auction – after the Board Resolution goes to the Towns for 30 days then it will get posted to the online auction site.

Goals:

- Grant Module in ERP is our priority for this year. We need to get a handle on how the grant items are purchased so that down the road we do not have to pay a grant back. If we were to get audited on a particular grant and the procurement guidelines were not followed, they could request us to pay the funds back.
- Creation of a Grant Policy
- Commodity Codes – Using them in ERP to be more efficient when researching amount of spend on items. Hoping to have this accomplished by the fall time.
- Purchasing Office to become more efficient, as we are an office of three employees and our work load has us drowning at this time and I don't see much relief coming for the work load to decrease.

Committee Help:

- Our Office needs help with making departments accountable, when they do not follow policy or process, that they have been trained on. (ex. Purchasing the wrong way, without a purchase order prior to order.
- Backing Purchasing when guidance is given and the department keeps pushing back. This is frustrating as we are following the NYS GML and our policy.
- More staff so we can be more efficient by becoming more centralized.

Public Information Office Department Overview and Update

2023 Highlights

- PIO Office sent out 126 press releases in 2023.
The PIO Office is responsible for the maintenance and content of 10 Facebook pages, 1 Instagram account, 1 twitter account, 1 Nextdoor account and a Linked In. The social stats for 2023 for the main Madison County, NY Facebook page were also included in this document.
- The PIO Office along with the Board of Elections and the Board of Supervisors Office ran the first ever “I Voted” Sticker Contest for our County. Students (ages 13-18) across Madison County were asked to create their own artwork to be featured on the sticker you receive when you went to Vote in November. Artwork was submitted by 81 students from six different school districts; Cazenovia, Canastota, Brookfield, Madison, City of Oneida, and Chittenango. From those 7 finalists were chosen and voted on by the public Winner is 18 year old Bonnie Pittman from Cazenovia. Her design features the Madison County outline, a cow and a creek, as she says the design “highlight some of the things that are a special part of Madison County”.
- The P IO Office is a very active member of the Buy Madison Campaign. The PIO Office works with our advertising firm C&D, also partners with The Hub, CCE of Madison County, and Tourism. During 2023 we worked to reach more of our local agriculture producers, advertise, held a business Matchmaker event, and created a Buy Madison isle at Parry's in Hamilton.
The Matchmaker event brought together 56 local businesses. These were stores, restaurants, ag producers and more. Many left the event making connections they have not had previously. It was a great event. Likewise, as part of Buy Madison, we work with the Rural

Equity Group. This group of state, local, and federal partners work together to help provide economic development guidance and assistance. In January 2024 we held a summit attended by 100 people, and are looking to do even more events.

- Every Monday, the PIO Office works with the Clerk to create the "Mike's Monday Message" videos on social media. These get great interaction and provide information for not only our residents but also our surrounding area
- 2023 the PIO Office started a Podcast – Madison County Milk House

There were 21 episodes in 2013 with 1,713 downloads. On average a podcast receives 70-100 listens. We are still small and figuring it out. The goal for 2024 is to increase downloads and have a steady schedule.

The PIO Office created content and maintained a yearlong advertising campaign on Big Frog 104 to promote Madison County. Topics included Buy Madison, Madison County

EMS, promoting career opportunities, DAD's Program, Foster Parenting, Flu Shots, What is the landfill and how to recycle, Healthy Workforce Event, Matchmaker Event, etc

PIO Office in 2023 took over the Employee Newsletter, rebranded it to be called the Madison Minute. It is now bimonthly instead of quarterly.

- The PIO Office created new logos for Madison County Public Health, Madison County EMS, and the Madison County Board of Elections
- In 2023 the PIO Office worked with Christine Coe, Kristin Guinto, Kristin Welch, Kathy Slade, Marisa Meehan, and Jennifer McGowan to rebrand the Madison County website. The new look brings our content up to date. We still have a lot of work to do, but this was a great effort by all. It launched the day before Thanksgiving.
- PIO Office is also involved in MTAC (Madison County's Threat Assessment Council), Youth Board, WOW Committee, Rural Equity and more.
- The Records Access Office handled over 586 FOIL requests. In 2022 it handled 209 FOIL requests. Every year the number of requests are increasing more and more. It is becoming a full-time job that is done by 3 people. The County Attorney's office assisted in redacting records for 1/3 of those requests.
- The PIO attended both NYSAC and NACo. The PIS also attended NYSAC in the Fall at the Turning Stone.

Other stories and topics handled by the PIO Office in 2023:

- First ever Ornament Contest for our Holiday Tree in the lobby of the COB
- Air Quality alerts – we worked hand in hand with OEM and
- Public Health to help our community understand what these alerts were and how to protect themselves.
- New Madison County EMS Ambulance service
- Landfill long-term planning information
- ReConnect project updates and press conference for the
- Hut placement
- Healthy Workforce Event
- Instrumental in assisting the City of Oneida with the natural gas explosion in September

Board of Supervisors:

1. Department Overview and Updates

Began at the County in 2019 and was appointed Clerk to the Board after the retirement of C. Urtz in August of 2022. Responsible for: Resolutions, Contracts and Insurance, journal proceedings, local laws and providing support to all of the Committee Secretaries.

We will be rolling out a new Agenda Software and anticipate having training around 8/1/24.

County Attorney:

1. Department Overview and Updates

Per Tina Wayland Smith, staff is present at all committees. The County Attorney's office has processed 396 contracts last year, 224 Under 20K contracts, and provide a monthly report of all Under 20K contracts that have gone through their office. Reviewed 267 FOIL requests, handle JD's Litigation against the county, and oversee outside litigation. They also represent the Board of Madison County

Information Technology:

1. Department Overview and Updates

Paul often references the saying, "Grow your own". This is reference to department growth, he has a couple of interns and anticipates that they will be great additions after all of the training they receive for how things are done at the County. IT processes a lot of data and are becoming more data driven. Paul presented to the board focusing on the security measures of the County. Security is not fun, and it is very difficult to maintain security while allowing people to do their jobs. IT serves 40 Divisions with 11 off-site buildings and 15 Towns/Villages and PD's. We all know what happened at Suffolk County. They had multiple IT departments and policies with no oversight. Madison County will not be structured that way. IT will be conducting another Cyber Security training

2. Discussion - Sheriff Computer Timeout Request

Looking to have lock out time increased for certain staff due to work responsibilities and the number of times necessary to log back in. Would like the committee to consider making an exemption to the list of employees he provides.

Human Resources:

1. Department Overview and Updates

Human Resources is focusing on recruitment.

Human Resources handles workers comp, recruitment, civil service, FMLA administration, COVID leave administration (that is hopefully going away by late summer).

Civil service was established in 1883 which prevents "political clean house". difficulty maintaining continuity.

If we could hire people without holding the test that would be a big help in hiring.

2023 - 74 Civil Service Exams

151 employees on boarded

70 current vacancies

650 Current employees

23% are eligible for retirement and we anticipate 30+ retirements in

2024

Chairman requested a succession plan for Department heads

Taylor Law provide structure tot he negotiations. Our employees are not permitted to strike.

5 Bargaining Unites - PBA 42 positions (deputies)

- Teamsters - 57 positions (corrections)
- NYS Nurses Assoc - 12 positions
- CSEA Blue Collar - Highway, Landfill, Building maint – 107 positions
- CSEA White Collar -Technical, Professional, Administrative Support positions - 330 positions

Moving forward in 2024 the focus will be enhanced recruiting, canvassing, professional discipline, policy updates and begin negotiations for 3 bargaining units

Resolutions:

1. In Respect to the Death of Marianne Borgia Simberg
Motion by Mary Cavanagh to Motion. Second by Rex Vosburg. The motion was Passed.
2. Approving Trade-in of 2022 Caterpillar 962M Loader
By consensus of the GOC Committee, this will be approved in the future by Highway, Building and Grounds. Motion by Rex Vosburg to Motion. Second by Kyle Reger. The motion was Passed.
3. Designating Disposal of Surplus County Personal Property
By consensus of the GOC Committee, this will be approved in the future by Highway, Building and Grounds. Motion by Melissa During to Motion. Second by Kyle Reger. The motion was Passed.
4. Amending Human Resources Policy and Procedures Hazard Communication Program
Motion by Melissa During to Motion. Second by Mary Cavanagh. The motion was Passed.
5. Authorizing the Chairman of the Board to Enter into an Agreement with CSEA White Collar Unit
To be voted on after Executive Session:
6. Reallocating the Title of Director of Veteran Service Agency in the Management Salary Plan
To be voted on after Executive Session:
7. Resolution of Appreciation – Retiree Recognition
Motion by Melissa During to Motion. Second by Kyle Reger. The motion was Passed.
8. Authorizing the Chairman to Enter Into An Agreement with Stoneleigh Housing, Inc.
Motion by Rex Vosburg to Motion. Second by Eve Ann Schwartz. The motion was Passed.
9. Authorizing the Chairman to Enter Into an Agreement with Diversion Management, LLC to Administer a Traffic Diversion Program
Motion by Melissa During to Motion. Second by Mary Cavanagh. The motion was Passed.
10. Creating Additional Deputy Fire Coordinator Positions in the Office of Emergency Management
Motion by Eve Ann Schwartz to Motion. Second by Kyle Reger. The motion was Passed.
11. Creating Five Fire Investigator Positions in the Office of Emergency Management
Motion by Rex Vosburg to Motion. Second by Mary Cavanagh. The motion was Passed.

Other Committee Business

1. Update from District Attorneys Office

Stated he is concerned with losing Attorney's. Assigned Counsel rates are enticing the attorneys to leave.
"Less hours - more money"

2. BOE - Department Overview and Updates

iPad for the polls are obsolete. They will need to purchase approximately 100 new iPads for 2025. They're waiting on maps for redistricting. If these are not put through by February 28 they will have to do a separate primary. They are looking at 5 Elections for this year. Village (2), Presidential Primary; State/local primary; and General Election. BOE sent letters to villages stating they may not be able to run elections or they will need to move them to November.

Enter into Executive Session for medical, financial, credit or employment history of a particular person or corporation, or matters leading to the appointment, employment, promotion, demotion, discipline, suspension, dismissal or removal of a particular person or corporation.

3:05 PM Motion by Melissa During to Motion. Second by Rex Vosburg. The motion was Passed.

3:52 PM Exit Executive Session Motion by Rex Vosburg to Motion. Second by Kyle Reger. The motion Passed.

1. Litigation-Executive Session
2. Salary Matter - Executive Session
3. Labor Negotiations - Executive Session
4. Labor Relations - Executive Session

Resolution 5 from above: Authorizing the Chairman of the Board to Enter into an Agreement with CSEA White Collar Unit

Motion by Eve Ann Shwartz to Motion. Second by Mary Cavanagh. The motion was Passed.

Resolution 6 from above: Reallocating the Title of Director of Veteran Service Agency in the Management Salary Plan

Motion by Rex Vosburg to Motion. Second by Kyle Reger. The motion was Passed

Next Meeting:

1. February 22, 2024 immediately following Finance Ways and Means

Preferred Agenda

Adjourn

3:55 PM Motion to Adjourn by Rex Vosburg to Motion. Second by TJ Stokes. The motion Passed.



CORPORATE COMPLIANCE REPORT

COMPLIANCE COMMITTEE

- On December 5th, the Board received a presentation of the 2023 Annual Report and 2024 Work Plans.
- The Corporate Compliance Committee met on February 20, 2024. The committee reviewed the compliance policies and procedures. The committee was briefed on the progress of the current work plan including auditing items and education and training initiatives.
- A Billing Sub-Committee was formed, and met on January 30, 2024. Employees overseeing billing activities presented an in-depth overview of their department's existing processes. Other topics of discussion included department's internal billing policies, identification of overpayments and OMIG self-disclosure requirements.

REGULATORY UPDATE

NY Office of the Medicaid Inspector General (OMIG)

NYS OMIG has recently released its 2024 Work Plan. In line with its commitment to supporting healthcare providers in fulfilling their compliance obligations, OMIG will actively engage in assisting providers. The agency will conduct thorough compliance program reviews to assess the implementation and operation of Medicaid providers' compliance programs, ensuring adherence to required standards. Furthermore, OMIG has issued updated self-disclosure guidance in January 2024, providing clear directives for providers in self-reporting processes.

Office of the Inspector General (OIG)

OIG has issued significant updates to its General Compliance Program Guidance. This latest release reflects the OIG's dedication to maintaining the highest standards of compliance within healthcare organizations. The revised guidance aims to provide a more robust framework for organizations to enhance their compliance programs, fostering integrity and accountability.

US Department of Health and Human Services (HHS)

In a noteworthy development, the US Department of HHS has shared voluntary cybersecurity performance goals tailored specifically for healthcare organizations. This initiative underscores the increasing importance of cybersecurity in the healthcare sector. Organizations are encouraged to adopt these voluntary goals to bolster their cybersecurity measures, aligning with the evolving landscape of healthcare information security. On February 8, 2024, HHS, through SAMHSA and the Office for Civil Rights, finalized a rule amending the Confidentiality of Substance Use Disorder (SUD) Patient Records regulations at 42 CFR part 2. This rule aligns specific aspects of Part 2 with HIPAA and HITECH, as mandated by section 3221 of the CARES Act.

POLICY REVIEW

The following policies were reviewed and updated, as necessary:

POLICY TITLE	LAST REVIEW DATE	SCHEDULED REVIEW DATE	SUMMARY OF CHANGES/REVISIONS	APPROVAL	NEXT REVIEW
Corporate Compliance Plan and Committee Charter (Attachment 2)	3/27/2023	2/20/2024	Minor updates; Changed the term Personnel to Human Resources. No recommended changes	Send to Board	February 2025
Compliance Code of Conduct	3/27/2023	2/20/2024	Added missing language to one sentence under Billing and Coding. Edit headings to match version in the Compliance Plan. One procedural edit.	Send to Board	February 2025

Conflict of Interest	3/27/2023	2/20/2024	Moved COI descriptions to the definition section of the policy. Suggested revisions to wording of Disclosure Statement questions and have a separate Disclosure Statement specifically for Class A Contractors.	Send to Board	February 2025
Compliance Policy Development and Approval	6/20/2023	2/20/2024	Procedural changes/wording updated.	Committee Only	February 2025
Response to Government Investigations & Interviews	3/27/2023	2/20/2024	No recommended changes.	Committee Only	August 2025
Search Warrants	3/27/2023	2/20/2024	No recommended changes.	Committee Only	August 2025

ANNUAL WORK PLAN STATUS

Activity	Description of Activity	Activity Owner	Target Date	Status
Policy & Procedures				
Annual Policy & Procedures Review	Corporate Compliance Officer or designee will, no less than annually, review the Compliance Policies to determine if they (i) require any updates, (ii) have been implemented; (iii) are being followed by all Affected Individuals; (vi) are effective:			
	• Corporate Compliance Plan including Committee Charter • Compliance Code of Conduct • Conflict of Interest • Policy on Compliance Policy Development and Approval • Response to Government Investigations and Interviews • Search Warrants • Enforcement and Discipline of Compliance Standards • Reporting of Compliance Concerns, Non-Retaliation and Non-Intimidation • False Claims Act and Whistleblower Provisions • Compliance Education & Training • Exclusion Screening • Auditing and Monitoring • Investigation and Resolution of Compliance Issues • Reimbursement Practices and Billing Errors; Reporting & Returning Overpayments	CCO & Committee	Q1 - Feb	In Progress
HIPAA Privacy Policies and Procedures Review	Review and update the HIPAA Privacy Policies and Procedures. Distribute to all covered departments.	CCO/HIPAA	Q1	Not Started
Adopt a Risk Assessment Policy or Formal Procedure	Establish a written process for the identification of program risks, and process for developing the annual work plan	CCO & Committee	Q2	Not Started
Written Information Security Policy Review	Review and update security policies as needed.	CCO/HIPAA	Q2	Not Started
Program Structure & Oversight				
CCO Reporting	CCO to report to the Board on a least a quarterly basis on the status of the program initiatives and risks	CCO	Quarterly	In Progress
Disciplinary Standards for Governing Body Members	Conduct a review of governing body bylaws to ensure compliance with Medicaid standards.	CCO/County Attorney/CA	Q1/Q2	In Progress
Disciplinary Action Process	Implement a process such that disciplinary actions for compliance-related offenses be reviewed with the HR Director to ensure consistency across all levels of personnel	CCO/HR Director	Q1/Q2	Not Started
New Service Review- EMS	Implement a process to ensure accurate and complete claim submission and payments for any new services (i.e. Emergency Medical Services). This process should occur for both claims submitted through internal billing functions or through third-party billing companies. The assessment should include a review of assigned CPT-4 codes, HCPCS Level II codes, diagnosis codes, and clinical documentation that supports the billable service.	CCO/EMS	Q1/Q2	Not Started

Program Structure & Oversight

Adequacy of Compliance Resources Review	Compliance Committee to Review Budget and Staffing to ensure significant risks are managed appropriately.	Committee	Q3	Not Started
Assessment of Multiple Roles of Compliance Officer	Compliance Committee to complete an assessment of the multiple roles of the CO to ensure it does not interfere with Corporate Compliance Responsibilities.	Committee	Q3	Not Started
Annual Workforce Survey	Conduct annual employee survey of Compliance Program to evaluate the effectiveness of the program and employees' understanding of their role and responsibilities	CCO	Q3	Not Started
Annual Compliance Program Effectiveness Assessment	External assessment of the effectiveness of the Compliance Program.	CCO/External	Q3	Not Started
2024 Risk Assessment and 2025 Work Plan	Conduct risk assessment to identify, measure, prioritize and respond to Program Risks. Develop the following year's work plan.	CCO & Committee	Q3/Q4	Not Started
License/Certifications Verification	Verification that all healthcare employees have current licenses or certifications.	CCO	Q4	Not Started
Provider Certification Requirements	Ensure all Medicaid Certificates (ETIN) from MH, PH and EMS are on file with the Compliance Officer.	CCO	Q4	Not Started

Education & Training - See detailed plan for further information

Compliance in Focus Newsletter	Quarterly newsletter that provides information on the status of the program and highlights important compliance relating matters.	CCO	Quarterly	In Progress
Education Sheets	Featured topics: OCR HIPAA Safeguards, Conflict of Interests, Code of Conduct, etc.	CCO	Monthly	Not Started
New Employee Trainings	Refer to the 2024 Training and Education Plan for details	CCO/HR/IT	Ongoing	Ongoing
Annual Corporate Compliance Training for Affected Individuals		CCO	Q3	Not Started
Annual HIPAA Privacy and Security Training		CCO/PO	Q4	Not Started
Specialized Training as Identified		CCO/Depts	Q4	Not Started
Security Awareness Training		IT	Q3	Not Started
Compliance & Ethics Week	A week to focus on the principal of awareness, recognition and	CCO	Q3	Not Started

Monitoring & Auditing - See Detailed Plan for further information

HIPAA Security Risk Assessment	External assessment of compliance with HIPAA Security Rule	CCO/IT	Q1/Q2	In Progress
Billing Review	Medicaid requires program overpayments be reported, returned, and explained in accordance with Medicaid self-disclosure program requirements. Risk assessment reviews of billing processes and activities to specifically identify incorrect billing patterns, and over and under payments.	CCO/External	Q2/Q3	Not Started
Quality Assurance Reports	PH CSHCN & Community Services, and Mental Health Clinic to conduct a quarterly quality assurance and report to CCO	Departments	Quarterly	In Progress
Contract Records	Audit of randomly selected department's contract record and processes	CCO	Quarterly	In Progress
Exclusion Screenings	Ensure exclusion screenings are performed on all employees, board members and contractors on a monthly basis.	CCO/Depts	Ongoing	Ongoing
Software Vetting Assessment Process	Develop the software vetting process for reviewing and evaluating software/vendors	IT	Ongoing	Ongoing
Hotline Testing	Testing of the confidential hotline to ensure it is working properly and messaging are being received.	CCO	Monthly	Ongoing
Hotline Monitoring	Monitor the hotline voicemail for reports of suspected non-compliance. Document in designated spreadsheet.	CCO	Weekly	Ongoing
Business Associate Due Diligence	All contractors identified as Business Associates must complete a Security Questionnaire to assess their ability to safeguard PHI.	CCO/PO/SO	Ongoing	Ongoing

Activity	Description of Activity	Activity Owner	Target Date	Status
Detection, Resolution and Response				
New Employee Orientation Evaluations	Review of responses to determine the effectiveness of the orientation process	CCO/HR	Ongoing	Ongoing
Overpayments	Review billing departments self-disclosure statements, record of tracking overpayments, and corrective actions	CO/Billing Staff	Monthly	Ongoing
Exit Interview/Surveys	Review of responses for any compliance concerns	CCO/HR	Ongoing	Ongoing
Confidential and Anonymous Hotline Calls	Investigate any reports of potential or actual non-compliance	CCO	Ongoing	Ongoing
Other Areas of Compliance				
HIPAA Privacy Rule Changes	Review of proposed regulatory changes, and identify areas for revision.	CCO/PO	Q1/Q2	Not Started
ADA Program - Website Accessibility Remediation	Create Work Plan to self-remediate County Website.	CCO/ADA Coordinator	Q1	Not Started

REVIEWS AND AUDITS

This chart provides an overview of various reviews and audits within different areas of the County, conducted both internally and externally.

AREA	TYPE	REVIEWER	REVIEW PERIOD	SUMMARY OF RESULTS/FINDINGS
Quality Assurance: Public Health CSHCN	Internal	Shelley DeGroat	Oct-Dec 2023	The early intervention and preschool program records reviewed had some missing documentation. The plan of follow up included obtaining the missing documentation and encouraging the use of checklists when completing the chart. Specific deficiencies will be discussed with individual personnel. It was also reported that the division reviewed three of its policies and procedures this quarter.
Quality Assurance: Public Health Prevent	Internal	Rebecca LaPorte	Oct-Dec 2023	Overall, the prevent division did not find any deficiencies in their reviews. It was noted that there was improved consistency in documentation since updating their guide and peer review forms last quarter. It was also reported that the division reviewed four of its policies and procedures this quarter, and there were a number of trainings completed by staff.
Quality Assurance: Mental Health	Internal	Cheryl Whitmeyer	Oct-Dec 2023	Of the four areas reviewed, there was one deficiency found in the admissions. It was found that a client's treatment review was not completed. The corrective action involved not billing for the service. The department will continue its quarterly chart reviews.
Quarterly HIPAA Walkthroughs	Internal	Dept. Privacy Officers	Jan-Mar 2024	In progress. Results are expected to be reported by 3/31/2024.
Contract Policy Audit – Board of Elections	Internal	Christina Kennedy	N/A	In progress. Results are expected to be reported to GOC at the March Committee Meeting.
Billing Compliance Audit (Tentative)	External	Contractor	TBD	An external consultant or auditor is proposed to conduct a comprehensive billing compliance audit for the Mental Health's Article 31 Clinic and the Public Health Department's healthcare programs. The objectives include assessing Medicaid/Medicare claims accuracy, identifying billing discrepancies, providing recommendations for process improvements, ensuring regulatory compliance, reviewing quarterly quality assurance reports, and offering guidance on post-payment billing audits. The timing is yet to be determined.

SELF-DISCLOSURES

Below is a chart outlining the self-disclosures made from December 1st through February 1st:

DEPARTMENT	REPORTED TO	REASON	DATE SUBMITTED	AMOUNT (\$)
Mental Health	Fidelis	Credit Balance (Cob Related/Duplicate Process)	1/3/2024	\$ 639.78
Mental Health	Excellus	Credit Balance	2/1/2024	3.60
Mental Health	Fidelis	Credit Balance (Cob Related)	2/1/2024	2,213.41
Mental Health	OMIG	Primary payer reversed to offset payment/deny	2/1/2024	209.83
Total:				\$ 3,066.62

EXCLUSION SCREENING REPORT

In accordance with the requirements of section 515.5 of Title 18 NYCRR, Madison County shall confirm the identity and determine the exclusion status of affected individuals at least every thirty (30) days. The County utilizes Kchecks, a web-based software system from Kinney Management Systems, LLC, to verify that applicants, employees, and vendors/contractors, board members, prescribing and authorizing physicians have not been excluded from participating in the Federal healthcare programs. The following chart shows the current number of individuals or organizations monitored by each department and the results of the checks. Results are reported to the Compliance Officer monthly and to the Compliance Committee quarterly.

DEPARTMENT	# OF CURRENT MONITORED ENTITIES ¹	# OF POTENTIAL MATCHES ²	# OF ACTUAL MATCHES
Public Health	678	1	0
Mental Health	13	0	0
Finance	8,017	50	0
Human Resources	832	8	0
Social Services	1,260	44	1 ¹

Note: Totals for the months of December 2023 and January 2024. The report for February is not yet available.

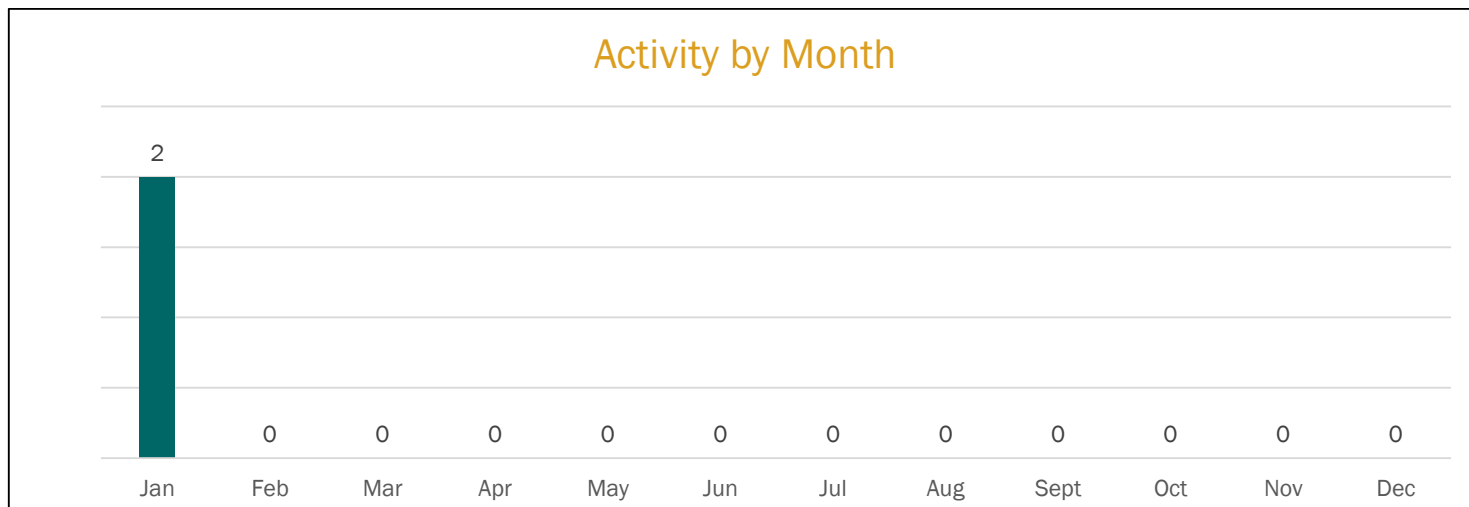
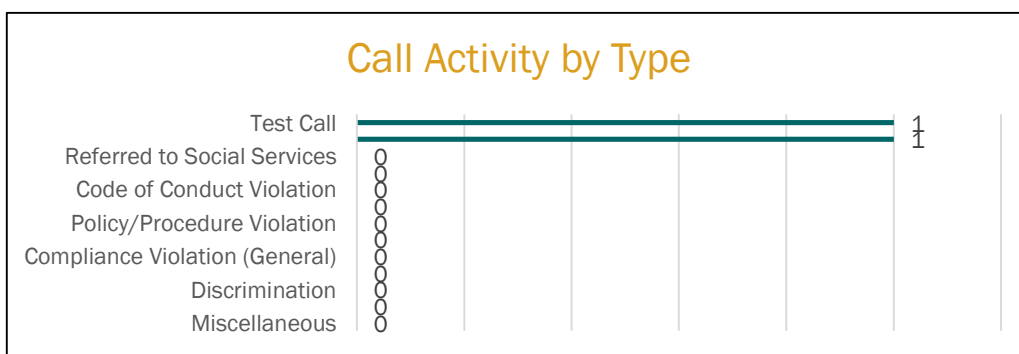
¹ An actual match was found on applicant for low income child care in the Social Services Department which is funded through a Federal Child Care Block Grant (CCBG). With the assistance of outside counsel, it was further investigated whether or not this program was a federally funded health care program. Upon reaching out to the Office of the Inspector General (OIG), they confirmed it was not a federally funded health care plan, allowing the Department of Social Services (DSS) to authorize payment for the applicant. The Compliance officer working with the Department instituted procedural changes that involve rescreening all applicants applying for other DSS programs, thereby mitigating the risk of disbursing funds to individuals who may be excluded.

CONFIDENTIAL HOTLINE CALLS

Madison County provides multiple channels for individuals affected by confidentially and anonymously reporting suspected or actual incidents of fraud, waste, or abuse. The primary reporting avenue is the compliance hotline, which is available for inquiries 24/7. Individuals are strongly encouraged to report any issues or concerns either anonymously or confidentially through the hotline. The Compliance Officer conducts routine monitoring and testing of the hotline. Reports can also be submitted using the Compliance Issue Report form or in person at the Compliance Officer's office. The accompanying chart on the right illustrates the number of concerns received and the corresponding communication method employed.

The graphs below show a summary of report activity by month and type for the year-to-date:

Total # of Reports: 2 As of 2/12/2024		
Line of Communication Used		
Hotline 2	In-Person 0	Written 0
Call Quality		
# of Concerns 1	# Test Calls 1	# Junk Calls 0



COMPLIANCE ISSUES REPORT

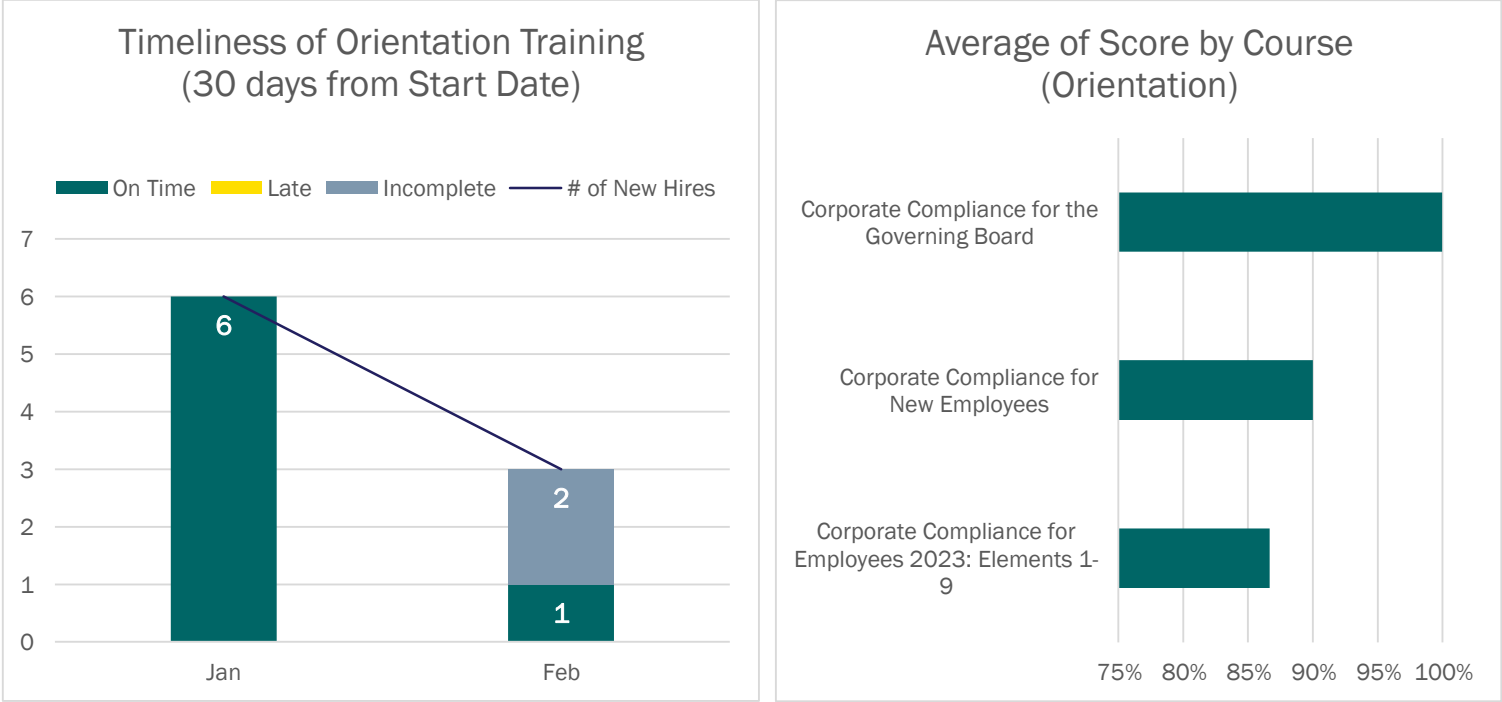
There are currently no active investigations at this time.

DISCIPLINARY ACTIONS

There are no current disciplinary actions for the past quarter. The Compliance Officer was consulted on one matter, but it has not risen to the level of disciplinary action. We are also still experiencing trouble with per diem employees completing their mandatory trainings within the required timeframes. The CCO continues to work with the department managers to address this issue.

TRAINING & EDUCATION STATUS

New Employees: Newly hired employees are required to undergo Corporate Compliance program training within 30 days of their commencement date. Among the 9 employees recently recruited into the covered departments, 78% have successfully met the training deadline, in line with the policy requirement. The remaining 2 employees who are currently out of compliance consist of per-diem or part-time corrections officers. The following charts summarize status of the completion of the corporate compliance training course and the average score on the post-training quiz.



The first publication of the Compliance in Focus Newsletter for 2024 was distributed on February 21, 2024. Additionally, two new education sheets highlighting HIPAA, specifically OCR’s reasonable safeguards for protecting patient health information and the use of Social Media, were posted to the Compliance Intranet page.

Compliance Officer: Over the past quarter, the Compliance Officer has attended the following training opportunities:

TRAINING	DATE	CEUS
HIPAA Mandates Session (100 Day Sprint)	1/7/2024	1.2
Advisory Opinion Session (100 Day Sprint)	1/8/2024	1.2
Compliance Program Effectiveness Session (100 Day Sprint)	1/11/2024	1.2
16th Annual Compliance Program Development Series	1/17/2024	0.0
Lessons and Examples from 2023's Breaches and Fines	1/18/2024	0.0
2024 HIPAA Compliance Survey Results	1/23/2024	0.0
OMIG Compliance Webinar Part 3	1/31/2024	0.0
OIG General Compliance Program Guidance: Emphasis on Medical Necessity	1/31/2024	1.2
Privacy Networking Group Meeting (Session 1 of 4)	2/15/2024	0.0
41st National HIPAA Summit (Virtual Conference)	2/27-3/1	0.0
2024 HIPAA COW Spring Virtual Conference (Virtual Conference)	4/11-4/12	0.0
28th Annual Compliance Institute (Virtual Conference)	4/15-4/17	0.0

HIPAA PRIVACY AND SECURITY

Training

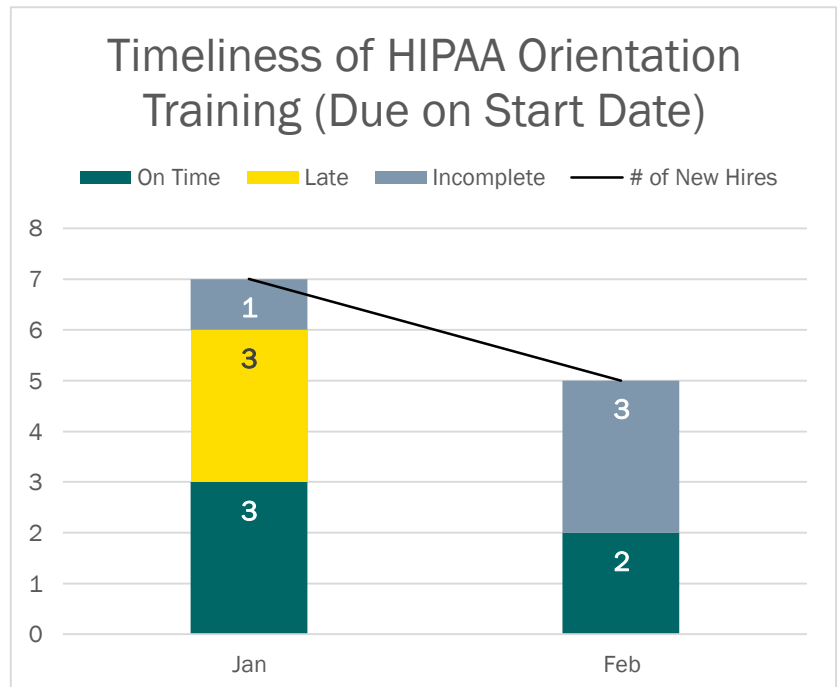
Every employee hired to HIPAA-covered departments must complete HIPAA Privacy and Security training before gaining access to Protected Health Information (PHI), typically on their initial day of employment. The following charts provide an overview of the training completion rates and the current status of HIPAA training course completion.

HIPAA Breaches

There was one incident that was evaluated as a potential breach of protected health information. After a meeting with the Mental Health Director, Compliance Officer, Privacy Officer and Security Officer, it was determined not to be a breach. The incident did involve social media, and an informational sheet was posted to the Education Sheet section of the Compliance Intranet page.

Business Associates

The following is a list of contracts with business associate agreements that were either signed this past quarter or are in progress:



CONTRACT NO.	DEPT	CONTRACTOR	DESCRIPTION OF SERVICES THAT INVOLVE THE USE, ACCESS OF DISCLOSURE OF PHI	DUE DILIGENCE PROCESS COMPLETED
23-374	Finance	OneGroup NY, Inc.	Human Resources, Employee Benefits and Workers' Compensation Consultant	Yes
23-431	Mental Health	Madison-Cortland Chapter, NYSARC, Inc.	Supportive Employment (SEMP)	Yes
23-492	Finance	Lifetime Benefit Solutions	125 Flexible Spending Account	NO
23-MH-6	Mental Health	Contact Community Services, Inc.	After-hours call coverage for the mental health clinic.	Yes
23-DSS-6	Social Services /Public Health/ District Attorney	Vineall Ambulance, Inc. dba Reliable Telephone Answering Service	Provide answering services for after-hours to include any Madison County Department that requires the service (Social Services People in Crisis, District Attorney, Public Health (temporarily until another service provider can be contracted)	Yes, Compliance does not recommend for use by Public Health Dept.
24-60	Mental Health	Communication Services Inc dba Interpretek	ASL Sign Language Interpreting Services	NO
24-EMG-1	EMS Division	Dr. Kirby Black	Medical Director, Attends Quality Assurance Meetings, Provides training	Yes
24-DOH-1	Public Health	DocuSign, Inc.	Electronic signature software for Early Intervention/Pre-K Program	Yes
24-DOH-2	Public Health	James McGuinness & Associates, Inc	CPSE Portal (including Full-Service Medicaid Service Bureau) and Basic Support Package	Yes
TBD	Sheriff Corrections	UMR, Inc.	Insurance	Yes *Would not complete our Questionnaire

RESOLUTION NO. _____

RE-APPOINTING MEMBERS TO THE ETHICS ADVISORY COUNCIL

WHEREAS, the term of Barbara Townsend, member of Ethics Advisory Council expires March 13, 2024; and

WHEREAS, the term of Carolyn Gerakopoulos, member of the Ethics Advisory Council expires March 13, 2024; and

WHEREAS, the Government Operations Committee recommends their re-appointment;

NOW, THEREFORE BE IT RESOLVED, that Barbara Townsend, of Canastota, be and hereby is re-appointed to an additional four year term on the Ethics Advisory Council expiring on March 13, 2028; and

BE IT FURTHER RESOLVED, that Carolyn Gerakopoulos, of Canastota, be and hereby is re-appointed to an additional four year term on the Ethics Advisory Council expiring on March 13, 2028.

Dated: March 12, 2024

Paul H. Walrod, Chairman
Government Operations Committee

RESOLUTION NO. 24-_____

AMENDING THE CORPORATE COMPLIANCE PLAN AND CERTAIN POLICIES

WHEREAS, Madison County as a Medicaid program provider is required to have an effective compliance program as required by NYS Social Services Law § 363-d and Title 18 of the New York Codes, Rules and Regulations (18 NYCRR) SubPart 521-1; and

WHEREAS, the maintenance of an effective compliance program necessitates the annual review and evaluation of policies and procedures; and

WHEREAS, the Compliance Officer has conducted a comprehensive review and evaluation of the Corporate Compliance Plan, Charter, and certain policies, including the Conflict of Interest; Compliance Code of Conduct; and the Compliance Policy Development and Approval policies; Response to Government Investigations and Interviews; and Search Warrants; and

WHEREAS, revisions have been made to the Corporate Compliance Plan, Conflict of Interest, and Compliance Code of Conduct Policies to align them with current operational practices; and

WHEREAS, the Corporate Compliance Committee has duly considered and evaluated the revisions to the County's Corporate Compliance Plan, Conflict of Interest policy, and Compliance Code of Conduct policy; and

WHEREAS, the Government Operations Committee recommends the approval of the revisions to the County's Corporate Compliance Plan and the Conflict of Interest and Compliance Code of Conduct Policies;

NOW, THEREFORE BE IT RESOLVED, that the Board of Supervisors hereby approves the amendment of the County's Corporate Compliance Plan, Conflict of Interest and Compliance Code of Conduct Policies, with the revisions taking effect immediately.

Dated: March 12, 2024

Paul H. Walrod, Chairman
Government Operations Committee

RESOLUTION NO. _____

DESIGNATING AN ACTING DIRECTOR OF SOLID WASTE MANAGEMENT

WHEREAS, the Solid Waste and Recycling Committee and the Government Operations Committee recommend that Gregory B. Gelewski, Deputy Director of Solid Waste Management, be designated as the acting Director of Solid Waste Management; and

WHEREAS, this designation is temporary in nature, a monetary stipend is appropriate,

NOW, THEREFORE BE IT RESOLVED that Gregory B. Gelewski be and hereby is authorized to receive an annual stipend of \$14,504, which will be paid retroactively , beginning on February 17, 2024 and continuing until a permanent Director of Solid Waste Management has been appointed.

Dated: March 12, 2024

Paul H. Walrod, Chairman
Government Operations Committee

RESOLUTION NO. _____

RESOLUTION OF APPRECIATION – RETIREE RECOGNITION

WHEREAS, the Madison County Board of Supervisors believes that County employees should be recognized for their faithful service to the public; and

WHEREAS, recognition of the distinguished service of certain County employees with an upcoming retirement is in order,

NOW, THEREFORE BE IT RESOLVED that the Madison County Board of Supervisors hereby recognize the dedicated contributions of Gary A. Strong and Theresa Snyder upon their retirement.

Gary A. Strong	Sheriff's Office	25 Years of Service
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Theresa K. Snyder	Social Services	25 Years of Service
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Dated: March 12, 2024

Paul H. Walrod, Chairman
Government Operations Committee

RESOLUTION NO. _____

**AMENDING THE WAGE RATES FOR
NON-REPRESENTED EMPLOYEES IN BLUE COLLAR UNIT JOB TITLES POLICY
AND PROCEDURES**

WHEREAS, in order to maintain adequate staffing of part-time non-represented employees, it is recommended that the hourly wage of these employees be increased by the same amount NYS minimum wage increased on January 1, 2024 (\$0.80/hr.); and

WHEREAS, effective January 1, 2025 and forward, the rates shall change annually by the negotiated percentage or dollar amount in unity with the CSEA Blue Collar Unit collective bargaining agreement; and

WHEREAS, the Wage Rates and Fringe Benefits for Non-Represented Employees in Blue Collar Unit Job Titles Policy outlines the terms and conditions of employment for part-time employees in blue collar unit titles (*working less than 50% of the normal work week*) and all temporary, seasonal or casual employees in blue collar unit titles; and

WHEREAS, Section 205 of the County Law authorizes the Board of Supervisors to fix the compensation of County employees; and

WHEREAS, the Government Operations Committee has reviewed the amendments to the policy and recommends adoption by the Board of Supervisors,

NOW, THEREFORE BE IT RESOLVED, that the Madison County Board of Supervisors hereby adopts the Wage Rates and Fringe Benefits for Non-Represented Employees in Blue Collar Unit Job Titles Policy and Procedures as amended effective April 1, 2024.

Dated: March 12, 2024

Paul H. Walrod, Chairman
Government Operations Committee

RESOLUTION NO. _____

**AMENDING THE MADISON COUNTY VEHICLE FLEET
POLICY AND PROCEDURES**

WHEREAS, the County established a policy on August 10, 2010 for general purpose vehicles fleet management including purchase, administration, maintenance and replacement of County vehicles; and

WHEREAS, an adjustment to the policy is appropriate to better reflect current practices in the management of the County fleet; and

WHEREAS, the County Highway Superintendent serves as the Vehicle Fleet Manager and recommends the proposed amendments to the policy; and

WHEREAS, the Government Operations Committee has reviewed the amendments to the policy and recommends adoption by the Board of Supervisors,

NOW, THEREFORE BE IT RESOLVED, that the Madison County Board of Supervisors hereby adopts the County Vehicle Fleet Policy and Procedures as amended effective immediately.

Dated: March 12, 2024

Paul H. Walrod, Chairman
Government Operations Committee