Topic: Vendor Management	ic: Vendor Management Department: Compliance		
Original effective date: 2/08 Last Revision Date: 9/26/24			
Owner: VP for Quality and Compliance	Frequency of reviews: Annual		
nternal/Regulatory Reference(s) (all that apply): 42 USC 1396a(a)(68)			
Related documents/Links: Please see references within the document			

**Policy:** It is the policy of The Arc of Monroe that business, administrative and support functions promote personal and organizational outcomes.

## **Additional Information:**

## Definitions:

Vendor: A person or company, not employed by The Arc, from whom we receive certain products or services.

Subject Vendor: A vendor who is affected by our Medicaid risk areas and who is subject to the Deficit Reduction Act (DRA) requirements (please cross-reference that policy), including those being reimbursed via Medicaid funds. This includes those vendors who:

- Provide a health-related service or items (regardless of volume) AND has a contract with us; OR
- Provide a service or item that has to do with health care; OR
- Provide general, non-health-related supplies to the agency including, but not limited to office supplies, items used in the provision of services to the people we support, car parts, automobiles, printing, food, shipping services, maintenance supplies, manufacturing supplies, appliance purchase or repair, or technology vendors; AND
- Receive at least 2 payments from us within any quarter of a calendar year; AND
- Get paid at least \$4,000 in any quarter of a calendar year

The following won't ever be subject vendors:

- Utility companies (electric, gas, phone, cell phone, internet, cable, trash removal, water, etc.)
- Professional organizations
- Insurance companies
- Benefit companies
- Investment companies
- Government agencies or offices

Procedure				
Task:		Responsible party:		
1.	In the month following the end of each quarter, the VP for Quality and Compliance will request:	VP for Quality and		
	*A list of new vendors for the prior 3 months from the finance office; and *A list of all checks the agency wrote for the same period	Compliance; Finance		

criteria for a subject vendor.and C3. For any that do, we will send them the following information and policiesVP fo	r Quality compliance r Quality compliance
<ul> <li>For any that do, we will send them the following information and policies via certified mail:</li> <li>*Our compliance plan</li> <li>*Corporate Compliance Policy for Affected Parties</li> <li>*False claims acts</li> <li>*Non-compliance detection and response; and confidential communications</li> <li>*Whistleblowers, Non-intimidation and Non-retaliation</li> </ul>	r Quality
via certified mail: *Our compliance plan *Corporate Compliance Policy for Affected Parties *False claims acts *Non-compliance detection and response; and confidential communications *Whistleblowers, Non-intimidation and Non-retaliation	
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communications *Whistleblowers, Non-intimidation and Non-retaliation	
*Whistleblowers, Non-intimidation and Non-retaliation	
This includes information on where to find all corporate compliance and	
HIPAA privacy policies and procedures (Arcmonroe.org), and how to report	
a concern anonymously or confidentially (our compliance hotline).	
Conjust of source letters and/or sortified mail return respires will be kent as	
Copies of cover letters and/or certified mail return receipts will be kept as evidence of compliance.	
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information). Exclusion checks will then occur monthly thereafter.	JEILC
	r Quality
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6. Vendors are responsible for conducting exclusion checks to confirm the Vendor	
identity and determine the exclusion status of its employees to the degree	515.
that they are impacted by The Arc of Monroe's Medicaid risk areas.	
that they are impacted by the Arc of Monibe's Medicald fisk areas.	
Minimally, these must be done every 30 days by reviewing the following	
databases:	
*NYS Office of the Medicaid Inspector General Exclusion List	
*Health and Human Services Office of Inspector General's list of Excluded	
Individuals and Entities	
VP for Quality and Compliance:	
1. The VP for Quality and Compliance acts as the agency's Compliance VP fo	r Quality
	ompliance
	r Quality
compliance program, and related policies and procedures. and C	ompliance
3. They have primary responsibility for reviewing and vetting vendors, for VP fo	r Quality
identifying which meet the criteria for "subject vendor" consistent with and C	ompliance
this policy, for conducting initial exclusion checks, and for ensuring that	
they receive required compliance-related information consistent with the	
DRA.	

## **Document revision record:**

Revision	Release	Reason for change	Approver
Date	Date		
5/30/08	5/30/08	Reasons for change not documented	VPQC
10/30/09	10/30/09	Reasons for change not documented	VPQC
5/4/10	5/4/10	Reasons for change not documented	VPQC
10/21/11	10/21/11	Reasons for change not documented	VPQC
2/21/12	2/21/12	Reasons for change not documented	VPQC
8/3/12	8/3/12	Reasons for change not documented	VPQC
6/5/17	6/5/17	Reasons for change not documented	VPQC
2/11/20	2/11/20	Transferred to new procedural format	VPQC
8/18/21	9/8/21	Adjusted the minimum disbursement level for subject	ICC
		vendors; added a discrete section for VPQC; added all	
		general vendors to be considered subject vendors	
7/18/22	7/18/22	Added technology vendors to the list under subject vendors	ICC
3/22/23	3/28/23	Further defined who a subject vendor is; added that	ICC
		information will be mailed certified; set frequency of	
		vendors checks to quarterly from semi-annually; and added	
		that core compliance training curriculum will be sent as	
		well	
4/12/23	4/28/23	Updated criteria for subject vendor to paid 2x and	ICC
		minimum \$4000 per quarter versus semi-annually	
10/30/23	10/30/23	Added "Cover Letters" to #3 in general procedure.	ICC
		Formatting and typos corrected.	
8/16/04	8/21/24	Added that vendors are responsible for conducing exclusion	ICC
		checks	
9/26/24	9/26/24	Added a cross-reference and some clarifying information	ICC