

**Arizona Department of Health Services  
Division of Behavioral Health Services  
PROVIDER MANUAL  
NARBHA Edition**

**Section 10.13**    **Provider Compliance Programs for Fraud and Abuse**

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**10.13.1 Introduction**

It is the policy of NARBHA that Responsible Agencies (RAs) develop and implement an annual Corporate Compliance Plan covering fraud and abuse. Other providers are encouraged to develop and implement a Corporate Compliance Plan as well.

**10.13.2 Scope**

All NARBHA Responsible Agencies

**10.13.3 Objectives**

The objective of this policy is to inform providers of NARBHA's requirements for development of a Corporate Compliance Plan for detection and prevention of fraud and abuse.

**10.13.4 Procedures**

Annually RAs evaluate and report the effectiveness of their previous year's compliance plans in writing to the NARBHA Corporate Compliance Officer.

Responsible Agencies (RAs) write an annual Corporate Compliance Plan utilizing the above-mentioned evaluation of the previous year's plan. The plan details how the RA will detect and report fraud and abuse and is due to NARBHA's Corporate Compliance Officer in final form by January 31 each year. Ample time for a review and corrections should be built into the submission of the evaluation and plan. NARBHA's Corporate Compliance Officer, reviews each evaluation of last year's plan and the current plan and expresses approval/disapproval/conditional approval within 10 working days of receipt. The plan of any RA includes information on fraud and abuse aversion, detection, investigation, prevention and reporting activities, including time frames, which the RA and NARBHA believe provide reasonable assurance and guidance directed to minimize instances of member, contractor, and staff fraud and abuse at the RA.

RAs are responsible for implementing the plan as written, unless NARBHA agrees to its modification in writing.

One-on-one training provided by the NARBHA Corporate Compliance Officer to any new RA Corporate Compliance Officer is mandatory within 3 months of assignment.

Providers are required to train staff on fraud and abuse detection and prevention in accordance with [Section 9.1, Training Requirements](#).