

Cornerstone Behavioral Healthcare

Section 4. Enforcement and Inspections

- A. **Inspections Required:** Cornerstone Behavioral Healthcare (CBH) will comply with all reasonable inspection requests by the Department of Health and Human Services (DHHS) to conduct inspections, surveys, and/or complaint investigations.
- B. **Organizational Cooperation:** CBH will cooperate fully with any survey, inspection, or investigation that DHHS conducts. At the time of an inspection or survey, a computer will be provided to the accredited DHHS representative to access CBH client records. Copies can be furnished upon request. Also, at the request of DHHS, staff and/or clients can be asked to speak with the DHHS representative. The clients or staff will have the right to refuse.
- C. **Statement of Deficiencies (SOD):** CBH will respond to any SOD in a timely manner. SODs will be forwarded to the CEO and Clinical Director, who will coordinate with Senior Management to evaluate the SOD and prepare a response. Responses will be processed and sent to DHHS in the timeframes described in the Licensing rules under Section 4.E.
- D. **Informal Conference:** The CEO and Clinical Director, in coordination with Senior Management, will decide if an informal conference is needed based on the Department issuing an SOD. If an informal conference is requested CBH will comply with procedures under Section 4.E as described in Licensing rules.
- E. **Plan of Correction (POC):** If DHHS issues an SOD to CBH, the CEO and Clinical Director, in coordination with Senior Management, will submit a POC to DHHS within 10 business days of receipt of the SOD. If a POC cannot be completed within this timeframe, CBH will reach out to DHHS to request an extension.
 - A. The POC should contain the following elements:
 - i. How the organization will address process and system issues that led to the deficiency;
 - ii. An organization-wide plan to ensure full regulatory compliance throughout the licensed organization;
 - iii. The procedure for implementing the POC, and the date of implementation;
 - iv. That the POC is effective, and that the specific deficiency cited remains corrected and in compliance with the regulatory requirements, including the timeframe and process for monitoring to ensure continued compliance after the date of completion; and
 - v. The title of the person responsible for implementing the POC.
- F. **Refusal to Issue a License:** The CEO and Clinical Director, in coordination with Senior Management, will address any refusal by DHHS to issue, renew, or approve a license, service location, or service type. CBH may retain outside counsel, if necessary.
- G. **Revocation or Suspension of a License:** The CEO and Clinical Director, in coordination with Senior Management, will address any revocation or suspension of a license. CBH may retain outside counsel, if necessary.
- H. **Operating Without a License:** CBH will not operate without a valid license.

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- I. **Grounds for Intermediate Sanctions:** If DHHS issues sanctions against CBH, the CEO and Clinical Director, in coordination with Senior Management, will review the grounds for intermediate sanctions and, if they occur, will take immediate action to correct the issue, and will not impede or interfere with enforcement of these regulations.
- J. **Intermediate Sanctions:** CBH will comply with any intermediate sanctions imposed by DHHS.
- K. **Appeal Rights:** CBH will appeal sanctions it deems unnecessary and erroneous.
- L. **Request a Hearing:** If necessary, CBH will request, in writing, a hearing with DHHS, as detailed in Licensing Rules and Regulations.

Frank Willard

CEO

07/15/2025

Date