§ 4414. Health care compliance programs. 1. The commissioner, after consultation with the superintendent of financial services, shall by regulation establish standards and criteria for compliance programs to be implemented by persons providing coverage or coverage and service pursuant to any public or governmentally-sponsored or supported plan for health care coverage or services. Such regulations shall include provisions for the design and implementation of programs or processes to prevent, detect and address instances of fraud and abuse. Such regulations shall take into account the nature of the entity's business and the size of its enrolled population. The commissioner and the superintendent of financial services shall accept programs and processes implemented pursuant to section four hundred nine of the insurance law as satisfying the obligations of this section and the regulations promulgated thereunder when such programs and processes incorporate the objectives contemplated by this section.

2. Notwithstanding any provisions of section twelve of this chapter to the contrary, penalties collected from any health maintenance organization certified pursuant to this article resulting from a violation of the health maintenance organization's mental health and substance use disorder parity compliance program shall be deposited into the behavioral health parity compliance fund as established pursuant to section ninety-nine-hh of the state finance law.