

# **Compliance & Ethics Program**



## **LETTER FROM OWNERSHIP**

Dear Team Member,

Welcome to the Centers Health Care (“CHC”) family. At CHC, we take great pride in our commitment to providing exceptional service to healthcare providers while staying true to the law and to our values. Determination to excel must be accompanied by a strong dedication to pertinent laws, professional standards and ethical principles so that our devotion to providing superior service is never tainted by other considerations. Maintaining our integrity at all times helps ensure that beneficiaries receive top quality care as well as the long-term vitality of our company.

CHC acknowledges that the healthcare industry is one of the most heavily regulated sectors in our society and certain practices that may be acceptable elsewhere may be unacceptable for us. It is, therefore, so important that the Compliance and Ethics Program serve as a central component of CHC’s operation and endure as part of the fabric of the company. Through this Program we aim to prevent and detect wrongdoing and promote quality of care. We accomplish this by maintaining open lines of communication which allow for the expression of concerns without fear of retaliation and by holding all team members accountable in a fair and transparent way—from owners and executives to managers and staff to contractors and business associates. No one is authorized to violate the law or professional standards nor may anyone instruct another to do so. Any and all threats to CHC’s values, including any suspected or known violations of law or this Program, must be reported immediately.

The Compliance and Ethics program has the full support of Ownership and in my capacity as Ownership’s representative, I hereby fervently endorse this Program. I also express our expectation that CHC personnel will read and become familiar with the Overview of the components of the Program and the legal and ethical standards set forth in the Compliance and Ethics Manual; participate in compliance training curricula; and integrate the letter and spirit of the Program in carrying out their respective responsibilities.

With this shared commitment to compliance and ethics firmly in place, we can focus our collective efforts on fulfilling our ultimate mission: providing the highest quality of service to each of our clients.

Sincerely,



Kenneth Rozenberg  
Chief Executive Officer  
Centers For Care LLC d/b/a  
Centers Health Care

# **COMPLIANCE AND ETHICS PROGRAM OVERVIEW**

## **Introduction**

Centers For Care LLC d/b/a Centers Health Care's ("CHC") Compliance and Ethics Program (the "Program") consists of several core components that function in tandem to help effectively prevent and detect wrongdoing and promote quality of care. The Program constitutes official company policy and anyone working at or associated with CHC in any capacity – including, but not limited to, owners, operators, executives, officers, directors, employees, contractors, physicians, suppliers, vendors, agents, appointees, business associates and interns (collectively, "Team Members")<sup>1</sup> – must abide by its guidelines as a prerequisite for any relationship with CHC.<sup>2</sup> This overview (the "Overview") sets forth the Program components and describes the role each plays in assisting CHC achieve its mission of helping the providers it services furnish each of their residents with the necessary care and services to attain or maintain the highest practicable physical, mental, and psychosocial well-being while following the law and maintaining an ethical culture.

The Program is not intended to address isolated acts or incidents, for which the company has established channels and procedures. It is when there is a concern with or a breakdown of these channels and procedures themselves that compliance steps in and works to improve or replace the system at issue. Utilizing the Program in this manner, across the entirety of operations, will allow CHC to prevent, detect and resolve conduct that fails to conform with legal, moral or professional standards, as well as shortcomings in company processes. The Program is also designed to help CHC proactively reduce or eliminate potential risk and anticipate potential weaknesses and inefficiencies in company systems. These benefits will, in turn, help ensure that CHC complies with the law and thereby avoids criminal prosecution, civil liability and administrative sanctions, as well as fines, penalties and exclusion from participation in healthcare programs, that may be imposed against individuals and/or entities that fail to do so. Other valuable functions of an effective Program include: a platform through which CHC can demonstrate its commitment to superior care and ethical values; a method for detecting issues early before they grow into larger problems; a tool to answer questions and respond to issues; a vehicle through which to disseminate information on laws, regulations and industry practices; and a mechanism to improve internal communications. Finally, this Program will help us achieve our mission by facilitating our pursuit of high quality and cost-effective service and eliminating anything that may undermine or detract therefrom.

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<sup>1</sup> Non-CHC employees with little or no involvement in the delivery of or billing for healthcare services or supplies (i.e. maintenance contractors) may be exempted from portions of the Program, as appropriate.

<sup>2</sup> CHC's focus on making this uniquely essential Program as understandable and user-friendly for every Team Member as possible has given rise to written material that is deliberately designed to be less formal and more colloquial than other company policies and procedures. Nevertheless, the Program is no less authoritative than any other CHC policy or procedure and is incorporated as part of the company's code.

## **I. Compliance and Ethics Manual**

The first and most tangible component of the Program is established principles and practices to be followed by all Team Members that are reasonably capable of reducing the prospect of violations of the law and the Program. The Code of Conduct (the “Code”) is a constitution of sorts, providing a foundational framework of the company’s ideals and conveying an overview of the expectations that the company has for those who are employed by or interact with CHC. The Code is accompanied by Standards and Procedures, which crystalize these ideals and expectations into paradigm principles, guidelines and internal controls. These written materials together make up the Compliance and Ethics Manual (“the Manual”).<sup>3</sup> Every individual and company with an employment or service relationship with CHC shall receive and review the Manual; internalize the principles it contains; and ultimately apply its precepts and spirit – using one’s good personal judgment – as appropriate, to the many scenarios that will arise while carrying out one’s responsibilities.<sup>4</sup>

## **II. Chief Compliance and Ethics Officer & Compliance and Ethics Committee**

The second component is the assignment of overall responsibility to oversee compliance with the guidelines set forth in the Manual – amid compliance with the law and the Program, more generally – to specific individuals within high-level personnel of the organization and allotting sufficient resources and authority to these individuals to achieve such compliance. This well-rounded group of CHC employees, consultants and/or contractors make up the Compliance and Ethics Committee (the “CEC”) and is chaired by the Chief Compliance and Ethics Officer (the “CCO”). CHC shall select CEC members who have demonstrated high integrity, good judgment, assertiveness, and an approachable demeanor, while eliciting the respect and trust of colleagues and having significant professional experience on a range of compliance-related issues. Those selected to serve on the CEC shall also have the requisite stature, seniority and experience in the organization and/or within their respective departments to carry out their duties and implement any recommended corrective action and procedure modifications. The selected CEC members shall then be adequately trained and educated to fulfill their responsibilities as enumerated herein. The names and contact information of the members of the CEC shall be distributed along with this Overview and/or posted in the company office.<sup>5</sup>

The CCO serves as point for all matters under this Program. The CEC is tasked with supporting and assisting the CCO in the development, implementation and monitoring of the Program – as set

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<sup>3</sup> Although the Manual compiles the Program’s guidelines so that it can be used as a centralized resource for compliance and ethics standards, because the Program’s tenets permeate every facet of operations, compliance and ethics principles are embedded in many of the company’s policies and procedures.

<sup>4</sup> Program roll-out procedures may be modified for contractors, vendors and business associates, as described in the Manual.

<sup>5</sup> In the event that CEC members are replaced or members’ contact information changes, the contact sheet may be revised and posted in the office, distributed to personnel or otherwise shared with Team Members.

forth in this Overview and in the Manual – and the inculcation of its values across company operations. The CEC, with the CCO at the helm, shall meet periodically<sup>6</sup> and take the lead in prioritizing the areas of greatest compliance risk to CHC,<sup>7</sup> as well as generate compliance reports, work plans, budgets and/or other useful tools to communicate the compliance agenda to ownership, and/or management, as appropriate. The CEC is responsible to ensure that compliance issues are identified; identified compliance issues are properly investigated; investigations include, as appropriate, assessing existing policies and trainings, carrying out corrective and disciplinary actions and conducting follow-up monitoring and auditing; and that investigations of identified issues are properly documented, logged and filed. The CEC shall ensure that the Program is effective and that it remains current with changes in operative laws, industry practices and circumstances at CHC.

Given the distinctively holistic nature of the Program, the CEC may collaborate and consult with many different departments, as well as facilitate inter-department communication and cooperation. Furthermore, recognizing the natural synergy between the compliance and quality assurance operations in their shared, albeit complementary, purpose to continuously improve the quality of care and ridding the company of any detractions therefrom, CHC anticipates a substantial interplay between the CEC and the quality assurance function (“QA”). Indeed, the Compliance and Ethics Committee may, as appropriate, serve as an arm of QA in, among other things, identifying, developing and implementing methods for enhancing company systems and procedures; investigating possible violations and irregularities; and conducting auditing and monitoring tasks.

The CCO and the CEC shall be granted the autonomy, power, resources and access to information and records needed to carry out their responsibilities and operate an effective Program. The CEC shall not be subordinate to CHC’s general counsel or financial officer but shall have direct access and report directly to ownership, management and/or legal counsel as frequently as necessary.<sup>8</sup> These reports shall discuss the past, present and future of the Program itself, as well as specific compliance matters, as appropriate. And ownership and management, in turn, shall provide the necessary support to and assessment of the CEC and the CCO to ensure the enduring effectiveness and success of the Program.

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<sup>6</sup> The CEC shall meet as often as necessary but no less than quarterly.

<sup>7</sup> Areas of focus should be determined by industry-wide trends as indicated in OIG Work Plans and semiannual reports and investigations and enforcement actions, as well as company-specific trends. Interaction with and feedback from staff, clients and beneficiaries should also play a role in this process.

Prioritization plays a key role after potential issues or trends are identified as well, as assessments of the type and severity of the incident or issue and the role in the company of the parties involved should be considered in determining the urgency and gravity with which matters are addressed.

<sup>8</sup> In the event of a significant concern or particularly troubling trend or incident, the CCO and/or CEC may determine that escalation of the matter is appropriate and may determine that an immediate report to appropriate senior leadership is warranted.

### **III. Delegation of Authority**

CHC shall use due care not to delegate substantial discretionary authority to individuals whom CHC knows or should know have a propensity to violate the law or the Program. CHC shall endeavor to appoint only those with the appropriate credentials, capabilities and values to leadership roles. To that end, CHC may conduct additional vetting and provide additional training for candidates selected for positions of influence.

### **IV. Training & Education**

CHC shall endeavor to communicate effectively its standards and procedures to all employees and other associates. The Manual – which contains the Code of Conduct and the Standards and Procedures – serves as the primary written method of such communication. The Manual is complemented by Training and Education programs that reinforce the information contained therein by breathing life into the codified concepts. Every CHC employee must complete initial Program training upon hire and periodically thereafter.<sup>9</sup> Instruction may deal with the Program itself,<sup>10</sup> operative fraud and abuse laws, government program requirements and/or other compliance- and ethics-related matters. Training sessions may serve as a refresher of established guidelines or an introduction of new ones; they may be conducted by CHC staff or outside instructors; and may take the form of recorded videos, online training systems, interactive webinars or live classes—all as needed and appropriate. There may also be focused education programs for certain groups on issues that relate to them specifically and additional instruction or re-training may be part of action plans or performance improvement efforts. In addition, there may be occasional email blasts, posted bulletins or other circulated publications that convey legal or regulatory updates and/or explain particular issues of interest in a practical and understandable manner.<sup>11</sup> The nature, format and frequency of training and education programming may vary in accordance with the subject at hand as CHC strives to keep personnel informed of developments in compliance and ethics issues in a way that is most conducive to genuine understanding.<sup>12</sup>

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<sup>9</sup> CHC may require business associates, agencies and contractors to train and educate their employees regarding compliance and/or this Program. Such personnel may also be invited to participate in company training and education programs, as appropriate.

<sup>10</sup> This may include the operation and functionality of the Program and its specific elements, such as methods of communication, investigation procedures and disciplinary guidelines; the role that different Team Members may play in and what the company expects of them regarding the identification, reporting, investigation and resolution process; and the way in which good-faith reporting parties are protected from any retribution.

<sup>11</sup> Topics for general and/or focused training and education curricula may include: quality of care risk areas; billing; coding; reimbursement; documentation; exclusion from participation in healthcare programs; proper credentialing; remuneration to induce or reward referrals; marketing; duty to report; privacy and confidentiality; and areas in which regulations or industry practices recently changed.

<sup>12</sup> This compliance training and education is in addition to – and not in place of – CHC’s comprehensive training and education program whereby anyone working for or with CHC in any capacity is adequately guided and prepared to fulfill his/her responsibilities in accordance with accepted industry standards and practices. Furthermore, acknowledging the key role training and education plays in the provision of high quality care that is in line with

## V. Reasonable Steps to Achieve Compliance

CHC shall take reasonable steps to achieve compliance with its standards. The first such step must be knowledge of and familiarity with the standards with which one must comply. To that end, CHC shall endeavor to remain familiar with operative laws, rules and industry-wide trends by, among other things, tracking the passage of new statutes and regulations or amendments to old ones, publications by regulatory authorities, investigations and prosecutions by enforcement agencies and changes in business practices.

The avoidance and elimination of non-compliance is another cornerstone of compliance achievement. Therefore, CHC has developed systems to help detect and identify violations of law and of the Program, as well as possible instances of fraud, waste and abuse and weaknesses in company procedures. The primary mechanism for this purpose is a reliable multidimensional reporting system that is available to employees, clients and anyone who wishes to share known or suspected violations or apprehension regarding goings on at CHC. Concerned parties can meet with, call or email the CCO, members of the CEC or supervisors.<sup>13</sup> For those who wish to remain anonymous or were unsatisfied with the response to an in-person report, CHC has set up a toll-free multi-lingual Compliance and Ethics Hotline (866-485-0115) (the “Hotline”) through which Team Members and others can talk to a live operator unaffiliated with CHC 24/7/365. Information regarding the Hotline is well-publicized via, among other things, posters hanging in conspicuous locations throughout the company offices.

Another means through which CHC may detect and identify actual or potential violations of law or the Program is by monitoring and auditing particular processes and performance measures. Thus, CHC’s QA may gather and analyze certain care- or financial-related data, examine specific techniques, review pertinent records, assess particular relationships and/or conduct interviews, questionnaires or surveys in an attempt to uncover possible aberrations, troubling patterns, unsatisfactory methods or potential risk areas.<sup>14</sup> CHC, most likely through QA, may also employ the services of the CEC, outside consultants or external auditors to review certain information or documentation – in a manner that maintains independence and integrity – to expose substandard practices or areas where improvement would be beneficial.

CHC recognizes that the foundation upon which a strong detection and identification structure is built is a steadfast No Retaliation Policy. It is unreasonable and unrealistic to expect individuals to come forward with reports and concerns, candidly participate in investigations or proactively

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operative laws and moral standards, the CEC may focus on the adequacy and effectiveness of relevant instruction material and programming as part of investigations of identified compliance issues and may suggest modifications as part of the corrective action process, as discussed below.

<sup>13</sup> CHC may also conduct employee exit interviews to solicit information regarding known or suspected noncompliance or substandard practices, among other accepted methods.

<sup>14</sup> Auditing, monitoring and/or spot-checking may be conducted in the areas of focus enumerated above as well as the Program itself.

seek guidance on how to deal with questionable circumstances or understand legal requirements if they do not feel safe from retribution. Since CHC does not merely encourage – but affirmatively requires – personnel to seek direction and report known or suspected violations or other genuine misgivings, the Program contains a strict No Retaliation Policy whereby anyone who participates in the Program in good faith is guaranteed complete protection from any harm, adverse action or intimidation.<sup>15</sup> Participants are also assured that their reports and correspondences will be held confidential and anonymous to the extent permissible.

## **VI. Consistent Enforcement of Standards**

Consistency breeds reliability, which, in turn, breeds endurance. Thus, the long-term success of this Program requires consistency in enforcing its principles. CHC aims to maintain a successful Program by, among other things, appropriately rewarding outstanding compliance performance and participation as well as appropriately disciplining violations of the Program, cooperation in or allowance of noncompliant behavior or failures to detect, address or report an offense hereunder—all in a consistent and fair manner.<sup>16</sup> This steadiness should provide the stability needed to build and maintain an effective, comprehensive and durable Program.

## **VII. Responding Appropriately to Offenses**

In the event that an offense is detected, a violation substantiated or a pervasive deficiency identified – through a prompt and proper investigation<sup>17</sup> conducted by QA, the CEC, CHC personnel and/or outside consultants – CHC shall take timely and decisive action to respond appropriately and to prevent recurrence.<sup>18</sup> This may include disciplinary action<sup>19</sup> against offending Team Members;<sup>20</sup> revisions to existing policies, training and education programs and company practices and/or the

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<sup>15</sup> This policy buttresses and complements operative Regulations that prohibit reprisal against genuine compliance performance.

<sup>16</sup> While uniformity and evenhandedness are valued, participation obligations of Team Members may vary by position and relationship. A manager or supervisor, for example, may be held to an elevated level of accountability for failure to detect, report or address legal or compliance issues.

<sup>17</sup> Investigations shall be thorough and transparent and may include, as appropriate, review of documentation or records; interviewing of parties involved and anyone else with useful information; viewing of surveillance footage; root cause analyses; inspection of possible missed opportunities to detect issue; and/or research of relevant Regulations.

<sup>18</sup> Although corrective action is generally taken only after substantiation of alleged misconduct, immediate steps to remediate potential further harm may be taken pending the outcome of an investigation when certain exceptionally sensitive and consequential issues are involved.

<sup>19</sup> Disciplinary action under the Program may include warnings, write-ups, probation, demotion, suspension and/or termination of employment or relationship in accordance with company policy, which is set forth in the Employee Handbook—depending on the nature, frequency and impact of the offense, as well as any mitigating and/or aggravating factors. Furthermore, appropriate enforcement agencies may impose civil or criminal fines, program exclusion and/or imprisonment.

<sup>20</sup> Offenses under this Program include not only express violation of its precepts or spirit but encouraging, directing, facilitating or permitting noncompliant behavior and failing to report or address known or suspected violations as well.



manner in which they are implemented; returning of improper payments; mandatory reporting;<sup>21</sup> voluntary disclosures; and/or modifications to the Program itself. The determination of the proper response to an offense shall be made by select CHC personnel, CEC members, QA, consultants and/or legal counsel, based on the particular circumstances. Suitable CHC personnel shall then implement the corrective action as soon and as publicly as practicable—facilitating lessons being learned and exhibiting the seriousness with which CHC takes compliance and ethics. Follow-up monitoring may be employed when appropriate to ensure that corrective actions have had the desired effect and that underlying problems have been sufficiently remedied.<sup>22</sup>

### **VIII. Periodic Reassessment of the Program**

CHC shall periodically reassess the Program to evaluate its effectiveness, uncover areas where improvements may be beneficial and identify modifications necessary to reflect developments within the organization and the industry. The CEC may assess the efficacy of existing compliance policies and initiatives by reviewing Program use and activity; the extent to which previously identified systemic problems have improved; evaluating the extent to which Program activity is being properly documented; and/or seeking feedback from employees via questionnaires or similar tools. Regarding Program updates, aside from the inevitable on-the-ground changes that occur at a company over time, the laws and regulations, as well as accepted practices, are constantly changing. A successful and effective compliance program must keep up. Therefore, the CEC – in collaboration with QA, outside consultants, counsel and CHC staff – shall monitor updates to relevant governing rules, new and modified industry procedures and evolving realities in the company. The CEC – with the assistance of internal and/or outside consultants or auditors, as appropriate – shall use this information, as well as comments, compliments and criticisms from staff, clients and others, to periodically revise and modify the Program.

### **Conclusion**

The success of this Program depends on the involvement and commitment of all Team Members. Working together in utilizing this Program as described above we will effectively prevent and detect wrongdoing and promote quality of service and help our company achieve and maintain success.

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<sup>21</sup> Outside groups to whom certain incidents or issues must be reported include, but are not limited to, state and/or federal health departments, compliance agencies, regulatory authorities and law enforcement officials.

<sup>22</sup> As expressed elsewhere in this Overview, as well as the Manual, the CEC shall endeavor to document and file all compliance efforts – from investigation strategies to interviews to document or evidence reviews to root cause analyses to plans of correction to performed remedial actions to follow-up monitoring and any other actions taken – all as appropriate and applicable.

# COMPLIANCE AND ETHICS PROGRAM MANUAL

## INTRODUCTION

Centers For Care LLC d/b/a Centers Health Care’s (“CHC”) Compliance and Ethics Program (the “Program”) consists of several core components that function in tandem to help prevent and detect wrongdoing and promote quality of care. A brief overview of the Program, provided under separate cover, sets forth the Program components and describes the role each plays in assisting CHC achieve its mission of helping the providers it services furnish each of their residents with the necessary care and services to attain or maintain the highest practicable physical, mental, and psychosocial well-being while following the law and maintaining an ethical culture (the “Overview”).

The first component of the Program is established principles and practices that are reasonably capable of reducing the prospect of violations of the law and the Program. The Code of Conduct (the “Code”) is a constitution of sorts—providing a foundational framework of the company’s ideals and conveying a synopsis of the expectations that the company has for those who are employed by or interact with CHC. The Code is accompanied by Standards and Procedures which crystalize these ideals and expectations into paradigm principles, guidelines and internal controls. These written materials, which together make up the Compliance and Ethics Manual (“the Manual”),<sup>1</sup> additionally serve as the primary method of effectively communicating CHC’s values, practices and requirements to those working at or with CHC. In that regard, the Manual is complemented by Training and Education programs that reinforce the information by breathing life into the codified concepts.

Although this Manual may seem quite extensive, it is not – nor is it intended to be – an exhaustive compilation of rules. Instead it is meant to alert you to key legal and ethical issues that may arise and serve as an outline of morals, standards and guidelines that should be internalized by each staff member so that its precepts and spirit can be prudently applied to CHC’s unique conditions and utilized in the many different – and often unpredictable – situations you may face in carrying out your responsibilities. This versatility must pertain not only to the many circumstances to which the principles of the Manual must be applied, but to the principles themselves, as the Manual and the overall Program must be periodically updated and modified to reflect changing laws, compliance risks, professional standards and on-the-ground developments.

CHC acknowledges the potential challenges involved in fully understanding the directives set forth in the Manual and knowing how to apply them and their underlying tenets appropriately. You are

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<sup>1</sup> Although the Manual compiles the Program’s guidelines so that it can be used as a centralized resource for compliance and ethics standards, because the Program’s tenets permeate every facet of operations, compliance and ethics principles are embedded in many of the company’s policies and procedures.

therefore urged to seek guidance from supervisors, compliance personnel and/or the Compliance and Ethics Hotline for further instruction.

### GENERAL MATTERS

1. The Program is intended to assist CHC in achieving its mission: to help the providers it services furnish each of their residents with the necessary care and services to attain or maintain the highest practicable physical, mental, and psychosocial well-being while following the law and maintaining an ethical culture.
2. The Program applies to every CHC staff member, as well as any individual or company working at or associated with CHC in any capacity, including, but not limited to, owners, operators, executives, officers, directors, employees, contractors, physicians, suppliers, vendors, agents, appointees, business associates and interns (collectively, “Team Members”).<sup>2</sup>
3. The Program constitutes official company policy and all Team Members must fully adhere to the Program as a condition of any employment by or association with CHC.<sup>3</sup>
4. Every Team Member is required to read the Manual, attend Compliance and Ethics training and education and participate in Compliance and Ethics initiatives, as appropriate.
5. While CHC does not expect Team Members to become legal or compliance experts, Team Members are expected to have a reasonable sense of right and wrong and have a general understanding of Regulations (as the term is defined below) that relate directly to their respective responsibilities; at least enough to enable them to determine when to seek advice.<sup>4</sup>
6. In the event that a Team Member feels that he or she would benefit from further clarification of any legal or regulatory requirement or any facet of the Program or the application of such directives to a certain situation, he or she is responsible to seek guidance from supervisors or appropriate compliance personnel. Guidance can also be sought anonymously via CHC’s Compliance and Ethics Hotline.<sup>5</sup>
7. If any Team Member knows of or suspects a violation of the law, professional standards or the Program, the Team Member is obligated to report all pertinent information to the Compliance and Ethics Hotline, which affords complete anonymity if desired. The Team

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<sup>2</sup> Non-CHC employees with little or no involvement in the delivery of or billing for health care services or supplies (i.e. maintenance contractors) may be exempted from portions of the Program, as appropriate.

<sup>3</sup> CHC’s focus on making this uniquely essential Program as understandable and user-friendly for every Team Member as possible has given rise to written material that is deliberately designed to be less formal and more colloquial than other company policies and procedures. Nevertheless, the Program is no less authoritative than any other CHC policy or procedure and is incorporated as part of the company’s code.

<sup>4</sup> Though the responsibility to be familiar with and abide by Regulations remains with each Team Member, CHC may, from time to time, endeavor to promote awareness of and encourage compliance with certain Regulations—via programs, activities, classes and/or publications, as appropriate.

<sup>5</sup> The features and functionality of the Compliance and Ethics Hotline is addressed below and in the Overview.

Member may also discuss the known or suspected issue with supervisors and/or appropriate compliance personnel. Failure to report a known or suspected violation is itself a violation of the Program and may result in disciplinary action up to and including termination.

8. CHC shall advertise the Hotline by hanging posters in the building with the Hotline contact information or some alternative appropriate means.
9. Adherence to and cooperation and participation with this Program and its policies, procedures and initiatives – as an essential element of employment by or association with CHC – may be considered in evaluations and assessments of Team Members’ standing with CHC and violations of the Program – whether active infringements or passive failures – may result in disciplinary action up to and including termination.<sup>6</sup>
10. The Chief Compliance and Ethics Officer (the “CCO”) serves as point for all matters under this Program and is assisted by the Compliance and Ethics Committee (the “CEC”) in this task. The Overview contains a section describing these roles and the accompanying responsibilities.
11. The Manual does not constitute an employment contract or any other type of contract, nor should it be interpreted as a promise of continued employment or any other relationship.

### CODE OF CONDUCT

1. Team Members must abide by all pertinent federal, state and local laws, rules and regulations, as well as health care program requirements, accepted industry practices, professional standards and the Program (collectively, “Regulations”).
2. The incalculable number of Regulations makes a complete presentation thereof unfeasible. Thus, the omission of a Regulation from this Manual or from express focus under the Program in no way diminishes Team Members’ duty to adhere to all operative Regulations.<sup>7</sup>
3. No one at CHC has the authority to instruct or encourage a Team Member or anyone else to violate any Regulation, nor does CHC Ownership or Management desire for anyone to violate any Regulation for any reason. Each Team Member is responsible for his or her own actions and will be held accountable appropriately.
4. Because a culture of candidness and critical introspection is crucial to the success of the Program and the fulfillment of our mission, CHC desires to maintain open lines of communication whereby Team Members or anyone else can voice concerns, share observations, report known or suspected violations of any Regulation, offer feedback or seek guidance (collectively, to “Communicate” or a “Communication”) in a forum that

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<sup>6</sup> While uniformity and evenhandedness are valued, participation obligations of Team Members may vary by position and relationship. A manager or supervisor, for example, may be held to an elevated level of accountability for failure to detect or address legal or compliance issues.

<sup>7</sup> Further information on operative Regulations, as well as source materials and synopses thereof, are available upon request of the CCO or a CEC member or anonymously via the Hotline.

provides confidentiality and anonymity, if preferred, as well as protection from any retribution for coming forward.

5. While Team Members can Communicate via the regular chain of command or directly to the CCO or a CEC member, the primary tool to Communicate under the Program is CHC's Compliance and Ethics Toll-Free Hotline (the "Hotline"), which is available to Team Members and others 24/7/365. Live operators not affiliated with CHC will receive and document Communications. This service is available in multiple languages, including English and Spanish, and callers will never be required to share their identity. Although detailed Communications – including the identities of the parties involved – make a proper investigation more feasible, callers may maintain complete anonymity if they so desire.

- **Hotline Number: 866-485-0115**

6. Compliance reports – including those received via the Hotline – shall be shared with members of the CEC who have been suitably trained and educated regarding the appropriate treatment of such information, including properly maintaining anonymity and confidentiality. CEC members shall use their discretion when sharing reports or information contained therein (i.e. as part of an investigation) and shall do so in a manner that safeguards reporting parties' confidences as well as all relevant privileges.
7. The seriousness with which CHC addresses Communications and the accompanying guarantees of confidentiality and anonymity for those who come forward makes this tool vulnerable to misuse by one who seeks to perpetrate harm on another. The use of any reporting method under this Program for disingenuous or dishonest means – including, but not limited to, submitting a report for vindictive purposes and/or that one knows to be untrue – may result in disciplinary action.
8. CHC's commitment to openness also requires all Team Members to be forthcoming, honest and cooperative with all internal investigations, audits and requests for information by authorized CHC compliance personnel or others acting on their behalf. No Team Member shall provide information that is imprecise, misleading or incomplete.
9. While CHC is absolutely committed to appropriately and candidly cooperating with proper external investigations, audits and requests for information by outside groups – including federal and state government agencies and contractors acting on their behalf, as well as law enforcement officials – ("Requests") the management of such cooperation will often require the input of legal and/or compliance personnel who can assess the many complicated – and often conflicting – rights and responsibilities involved. Therefore, please immediately refer all Requests to management or your supervisor, who can contact the appropriate parties to properly respond after considering issues of privilege, privacy and numerous other factors under the law. Legal and compliance personnel will direct the truthful, timely and comprehensive cooperation with such Requests as required by law.<sup>8</sup>

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<sup>8</sup> Routine government or other agency contact such as standard audits should be handled in accordance with CHC's regular policies and procedures.

10. CHC has a policy of non-intimidation and non-retaliation that it takes extremely seriously in recognition that the authenticity and reliability of the entire Program rests upon the protection of Team Members and others who come forward and Communicate. It is absolutely prohibited to take any retaliatory adverse action<sup>9</sup> against a Team Member or anyone else who cooperates with an investigation or comes forward with a genuine concern, question or report in good faith and who was not involved in the misconduct in question. If one fears retribution or feels uncomfortable openly requesting guidance or sharing information for any reason, he or she should report such fear or discomfort either anonymously via the Hotline or directly to a superior, the CCO or a CEC member.
11. All Communications will be held confidential to the extent that the Program can be properly implemented and operative Regulations can be obeyed.

## PROCEDURES AND STANDARDS

### **Compliance Program**

1. Team Members shall receive a copy of the Overview and the Manual upon commencement of employment by or association with CHC or as soon as possible thereafter.<sup>10</sup>
2. Team Members shall receive initial compliance and ethics training and education upon commencement of employment by or association with CHC or as soon as possible thereafter. Team Members shall receive periodic compliance and ethics training and education thereafter, as appropriate. Such training and education may vary based on the position of the Team Member or the nature of his/her association with CHC. The Training and Education Program is discussed in the Overview as well.
3. Appropriate certification of receipt and understanding of and commitment to compliance and ethics materials, as well as attendance at compliance and ethics training and education programs shall be maintained. Such certifications may be accomplished via executed acknowledgments, sign-in sheets, post-training exams or other acceptable methods.
4. Copies of the Manual and other compliance material shall be made available for Team Members and others, as appropriate.

### **Quality of Services**

1. CHC is committed to helping the providers it services furnish each of their residents with the necessary care and services to attain or maintain the highest practicable physical,

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<sup>9</sup> Prohibited retaliatory action hereunder includes, but is not limited to: termination; demotion; elimination from consideration for promotion; reduction of pay; harassment; and intimidation.

<sup>10</sup> Program roll-out procedures may be modified for contractors, vendors and business associates, as appropriate. For example, one or more representatives of companies with whom CHC does business may be provided with a copy of the Manual and may be educated regarding the Program and the companies, in turn, will be responsible to ensure that their employees are, at a minimum, properly acclimated to CHC's Program as it relates to their relationship and dealings with CHC.

mental, and psychosocial well-being and it is this commitment that shall guide everything done at CHC.

2. CHC shall follow operative Regulations for servicing its clients' residents, including, but not limited to, not discriminating based on payor source or race, color, religion, national origin, sex, age, disability or any other legally protected characteristic.
3. CHC shall ensure that staff members obtain and maintain appropriate credentials, licensure, experience and expertise to carry out their respective tasks and in accordance with applicable Regulations; that staff members receive appropriate training and education; and that staff members are properly supervised. CHC may require companies that serve as business associates or contractors to adopt similar programs regarding their employees who are providing services at or to CHC.
4. CHC shall not employ or associate with any individual or entity that is excluded from participation in the Medicare or Medicaid programs. CHC shall similarly refrain from employing or associating with individuals or entities that have otherwise been disqualified from fulfilling the particular role for which they are being utilized.<sup>11</sup> Those who were employed by or associated with government offices or agencies in certain capacities may also be precluded. In the event that Team Members are found to be excluded or otherwise ineligible from continuing their association with the company, CHC shall take swift appropriate action up to and including termination of employment or relationship.
5. Providing high quality services requires that incidents and accidents are acknowledged, investigated, addressed and corrected openly and honestly. To that end, CHC shall comply with all applicable mandatory reporting Regulations by, among other things, timely and properly reporting events and issues, as well as compiling and maintaining documentation, all as required and appropriate. In no event shall a Team Member attempt to conceal or cover up any potential or actual violation, wrongdoing or illicit conduct.
6. CHC's commitment to high quality services may compel the Quality Assurance function ("QA") – for example, in the event of recurrent errors, inadequacies, adverse events or grievances – to employ the services of the CEC, as appropriate, to investigate, assess, correct and/or monitor matters on behalf of QA, as well as conduct clinical reviews to help ensure residents receive appropriate services.

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<sup>11</sup> CHC may conduct certain investigations into Team Members – including, but not limited to, reviews of the Office of Inspector General's List of Excluded Individuals/Entities and similar federal and state lists, as well as criminal background, licensing, certification and reference checks – upon hire or commencement of relationship and periodically thereafter. CHC may also impose affirmative duties on Team Members to disclose any exclusions, debarments, suspensions or convictions upon hire and if such adjudications occur at any point while affiliated with the company. Increased vetting may be conducted for and additional disclosures may be required of Team Members in positions of influence or high-risk and those vested with discretionary authority. And CHC may require business associates, agencies and contractors to adopt similar initiatives regarding their employees who are providing services at or to CHC. Please check the [Employee Handbook/Policies & Procedures Manual] for details of any such policies and procedures.

## Billing and Reimbursement

1. Team Members must adhere to all relevant billing and claims submission Regulations.
2. Tainting the veracity of billing, coding or reimbursement documentation is absolutely prohibited.
3. CHC shall bill only for services and items that were actually provided as claimed and were medically necessary and reasonable, as determined and ordered by an appropriate health care professional, based on residents' specific clinical conditions.<sup>12</sup>
4. Proper, adequate, accurate and timely documentation to support coding and billings shall be maintained in accordance with Regulations and in as organized, legible and accessible form as practicable.
5. CHC shall abide by operative insurance Regulations, including, but not limited to, billing residents for applicable co-pay and deductible payments<sup>13</sup> and accepting the applicable Medicare or Medicaid payment for covered items and services as the complete payment, unless a valid exception applies.
6. If a Team Member identifies or suspects the receipt of a potential overpayment or the misappropriation, conversion or wrongful retention of health care benefits and/or government funds he/she is required to report such knowledge or suspicion to the CCO, a CEC member and/or the Hotline immediately.<sup>14</sup>
7. CHC's commitment to proper billing and reimbursement practices may compel QA to employ the services of certain company personnel, the CEC and/or consultants or contractors, as appropriate, to audit, monitor and/or review procedures and systems for accuracy, legitimacy and effectiveness on behalf of QA. QA may also utilize the CEC and/or others for the collection and analysis of select billing and reimbursement data as part of CHC's ongoing efforts to uncover vulnerabilities and improve processes.<sup>15</sup>
8. Detailed information about certain laws, remedies and penalties regarding false claims and statements with respect to the role of such laws in preventing and detecting fraud, waste, and abuse in Federal health care programs, as well as whistleblower protections under such

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<sup>12</sup> CHC relies, often exclusively, on the information it receives from the providers for billing and reimbursement processing, pursuant to the parties' services agreement(s).

<sup>13</sup> Waiving such payments may also implicate the Anti-Kickback Statute (i.e. when offered in order to persuade residents to extend their stay).

<sup>14</sup> Wrongful possession of health care benefits, if confirmed, may warrant a report to state and/or federal agencies, depending on the specific circumstances. Such determinations will likely require the involvement of legal counsel.

<sup>15</sup> Highly sensitive areas that may warrant particular attention include medical necessity; Medicare eligibility; inadequate, substandard or deficient care; RUG assessments and classifications; case-mix data; overutilization; duplicate billing; upcoding; unbundling; accuracy of cost reports (including, but not limited to, appropriate allocation of costs among payor sources, claiming of salary expenses and reimbursable costs); and ensuring that billing entries correctly reflect the care provided and are properly documented, dated and signed. Additional vigilance may be deemed appropriate when altering or amending medical and billing records to ensure that acceptable methods are being employed.



laws shall be provided to staff members and will be made available for all Team Members.<sup>16</sup>

## **Business Practices**

1. CHC insists that its mission to provide high quality service never be compromised by self-interest or financial interest of any kind.
2. CHC's resolve to have nothing other than the needs of beneficiaries drive care-related decisions compels the company to strictly adhere to applicable federal and state Anti-Kickback Statutes and Self-Referral Laws. Team Members must never accept, offer, receive or solicit anything of value – directly or indirectly – for the purpose of inducing or rewarding the past or potential referral or generation of business reimbursable by government health care programs. This applies to the procurement, purchase, lease or order of any health care item or service and applies to compensation in the form of cash, commissions, gifts, gratuities or discounts to or from vendors, suppliers, health care providers or beneficiaries or their family members, unless an exception or Safe Harbor applies under the law.<sup>17</sup> Cross-referral and swapping arrangements may also be problematic hereunder. As part of CHC's goal of avoiding even the appearance of impropriety, CHC will endeavor to keep transactions at arm's length, for fair market value and otherwise commercially reasonable, as well as refrain from essentially basing compensation of Team Members in a position to refer or generate business on the volume or value of referrals or generation of business, thereby eliminating potential incentives for illicit referrals, overutilization, unnecessary services and the like.<sup>18</sup>

Given the extreme seriousness of this group of criminal and civil statutes and the unique complexity of their application, Team Members are encouraged to seek counsel before offering or accepting anything of value in the workplace—either directly from the CCO or CHC's attorney or anonymously via the Hotline.

3. CHC shall avoid compensation structures that create undue pressure to pursue profit over compliance.
4. CHC and its Team Members shall never pay or provide any money, gift or anything else of value to an investigator or public official as a bribe; to induce certain action or inaction; or for any other illicit purpose.

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<sup>16</sup> This material will be provided in compliance with the Deficit Reduction Act of 2005, Section 6032, under the heading "Employee Education About False Claims Recovery."

<sup>17</sup> Common examples of potentially problematic "remuneration" include sports or theater tickets, lavish holiday gifts and travel arrangements—for which ill-intent may be imputed. Common examples of acceptable "remuneration" include inexpensive office supplies, simple meals and nominal gift cards—as long as no objective in the conveyance is to generate business. As stated above, the legitimacy of any benefit vis-à-vis the Anti-Kickback Statute will ultimately turn on the parties' intent.

<sup>18</sup> This principle is particularly relevant to doctors and to entities with which the doctor or an immediate family member has a financial relationship pursuant to the federal Physician Self-Referral Law, commonly referred to as the Stark Law, and related state laws.

5. Team Members' interests must yield to CHC's interests. Therefore, Team Members are required to disclose actual or potential conflicts of interest and avoid situations in which their duties and allegiances may be jeopardized—whether they are on the giving or receiving end of the benefit.<sup>19</sup> This is particularly relevant to staff members in positions of influence over business decisions and, as such, select personnel may be required to make certain periodic disclosure statements in an attempt to eliminate even the appearance of misconduct.
6. CHC records and documents – including electronic medical records, billing records and documentation generated pursuant to this Program – shall be created, distributed, secured, retained<sup>20</sup> and destroyed in accordance with the company's record retention program and in line with relevant Regulations.<sup>21</sup>
7. Team Members shall safeguard CHC's confidential and proprietary information and trade secrets by, among other things, refraining from sharing any lists, reports, policies and procedures, forms, business plans, electronic media, processes or systems with competitors or anyone else outside of the company—even after employment by or relationship with CHC has come to an end.
8. CHC shall safeguard and protect the confidential and private information of its residents in line with relevant Regulations, including, but not limited to, the Health Insurance Portability and Accountability Act (“HIPAA”), the Health Information Technology for Economic and Clinical Health (“HITECH”) Act and the Omnibus Rule of 2013.<sup>22</sup> The sensitive and private nature of much of the information handled at CHC, coupled with the information-sharing culture in which we live, makes the protection of confidential material a particularly challenging issue. For example, the widespread use of text messaging as a means of communication, posting of photographs on social media and utilization of other mediums through which data is freely transmitted, requires Team Members to remain vigilant in maintaining confidences appropriately and to reach out for guidance and direction when questionable situations arise.<sup>23</sup>

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<sup>19</sup> Potentially problematic situations hereunder include: working for or with a competitor of CHC; ownership in or employment by any outside entity that does business with CHC; or use or disclosure of restricted or private information regarding CHC for personal gain or for the gain of a family member. Any such arrangements should be discussed with and approved by the CCO, a member of the CEC and/or counsel, as appropriate.

<sup>20</sup> HIPAA mandates a six-year minimum for retaining medical records, for example.

<sup>21</sup> In the event that regular document retention procedures must be suspended (i.e. audits, investigations, lawsuits), appropriate Team Members shall be informed of such suspension along with instruction for the specific circumstances.

<sup>22</sup> Compliance efforts hereunder may include paper document safekeeping and cyber-security; restrictions on obtaining, discussing or destroying confidential information; limiting access to sensitive information to specific active Team Members; and authorization and breach notification procedures, all in accordance with operative Regulations.

<sup>23</sup> Please refer to the appropriate manual and/or handbook for CHC's numerous policies and procedures regarding the protection and handling of private information; the use of electronic devices and social media; and disclosure and authorization processes.

9. CHC shall adhere to operative Regulations regarding cyber-security and appropriate planning for a possible cyber-attack to help avoid or mitigate potential compromising circumstances.
10. CHC shall have proper business associate agreements in place before sharing confidential material – including protected health information – with certain vendors, contractors or other non-CHC employees, in accordance with relevant Regulations.
11. CHC shall maintain accurate books and records and shall ensure that all accounting entries and financial documentation are in line with relevant Regulations.
12. CHC shall endeavor to safeguard resident funds by, among other things, properly monitoring resident fund activity and investigating allegations of misappropriation as appropriate.
13. Advertising and marketing material shall comply with relevant Regulations and be truthful and accurately reflect the services provided at CHC.
14. Team Members shall treat each other with respect in accordance with relevant Regulations and refrain from abusive or harassing behavior of any kind.
15. CHC shall adhere to operative Regulations regarding the health and safety of its personnel, including, but not limited to those involving the Occupational Safety and Health Administration (OSHA) and related state organizations.
16. CHC personnel shall properly and timely complete and submit time cards and/or other documentation evidencing the time they work in accordance with company policies and procedures and operative Regulations, thus enabling CHC to fulfill its desire to pay all employees for all time worked as appropriate.

### CONCLUSION

As stated above, this Manual is not an all-inclusive presentation of the rules and practices under the Program. Instead, it is a means of conveying CHC's ideals—the letter and spirit of which should be applied appropriately by Team Members through their use of good judgment. Should you desire further clarification of any aspect of this Manual or the Program, please reach out to the CCO or a CEC member or anonymously via the Hotline.

With our shared commitment and participation in the Program we will effectively prevent and detect wrongdoing and promote quality service and thereby achieve long-term success.

**Centers Health Care**  
**Compliance and Ethics Committee**  
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