

HAMASPIK CARE, INC.  
POLICY AND PROCEDURE MANUAL

CORPORATE COMPLIANCE PLAN

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**Last Reviewed by Board Meeting January 25, 2020**

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**Foreword:**

Hamaspik Care, Inc. is committed to conducting its business affairs with honesty and integrity. Our commitment applies to relationships with competitors, individuals we serve, families, vendors, and employees/personal assistants. Each employee/personal assistant must maintain the highest standards of personal and professional ethics. These rules, practices, and policies concerning conduct and behavior are instrumental to the continued success of Hamaspik Care, Inc..

The Board of Directors (BOD) has directed the preparation of this comprehensive written compliance plan. The BOD will receive quarterly compliance reports from the Corporate Compliance Officer.

The Plan, in its entirety is published on the agency's website and every Hamaspik Care, Inc. employee/Personal Assistant, Independent Contractor and Vendor is required to review it.

**Definitions:**

The following terms used throughout this policy, unless the context specifically indicates otherwise, shall have the following meanings:

- A. Affected Individuals means all employees, personal assistants, contracted employees, independent contractors, and governing board members.
- B. Contracted employee means an outside contractor providing billing/claims services or management/responsibilities of medical care, services, or supplies.
- C. Independent contractor is a person or entity contracted to perform work or provide services to as a nonemployee.
- D. Fraud means any type of intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to him/herself, Hamaspik Care, Inc., or any other person.
- E. Abuse means practices that are inconsistent with sound fiscal, business, or medical practices and result in an unnecessary cost to the state or federal government or Hamaspik Care, Inc..
- F. CCO shall refer to the Corporate Compliance Officer.
- G. OMIG shall refer to the NYS Office of Medicaid Inspector General.

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**1. Written Compliance Standards**

**A. Codes of Ethical Conduct:**

It is the policy of Hamaspik Care, Inc. to comply with all applicable federal, state, and local laws and regulations and to conduct all business in accordance with uncompromising ethical standards. Integrity and trust are essential to the mission of serving our clients. Adherence to such standards will not be traded or compromised for financial, professional, or other business objectives.

Affected individuals should not conduct business that is not in the full spirit of honest and ethical behavior. An affected individual should not cause another individual to act or behave in such a manner, either through inducement, suggestion, or coercion. Furthermore, an affected individual should not furnish company, employee, or competitor information to any individual, business, or entity without first consulting with and acquiring the approval of their supervisor.

Each affected individual is expected to report dishonest activities by any individuals to their supervisor. It is the responsibility of all affected individuals to refrain from and report observed or suspected fraud, improper or fraudulent billing for health care services, submitting false paperwork, or any other type of fraud and abuse to the corporate compliance officer.

Failure to report such activities is considered a violation of the Compliance Program Codes of Conduct/Ethics and the Corporate Compliance Policy. Knowingly submitting false information is also considered a violation of the Compliance Program Codes of Conduct/Ethics and the Corporate Compliance Policy. Initiating or encouraging reprisal action against an employee or other person who, in good faith, reports known or suspected Compliance Program Codes of Conduct/Ethics violations are prohibited. Hamaspik Care, Inc. may reprimand, suspend, or dismiss any affected individual who fails to comply with this policy.

**B. Policies and Procedures:**

Hamaspik Care, Inc. has established policies and procedures to address a variety of potential risk areas, including the risk of liability under several fraud and abuse regulations. These policies and procedures are part of a comprehensive framework of compliance controls that exist throughout Hamaspik Care, Inc..

Hamaspik Care, Inc. will review, revise and develop new policies and procedures, as necessary, to ensure that Hamaspik Care, Inc. operations are conducted with best practices. These policies and procedures cover billings and payments, medical necessity and quality of care, governance, mandatory reporting, criminal background, credential and other background screening of employees, and other risk areas associated with personnel practices, and business and fiscal operations. Below are links to key policies and procedures that together with this document comprise Hamaspik Care, Inc.'s Corporate Compliance Plan.

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- Accounting Policies and Procedures
- Personnel Policies and Procedures
- Internal Control Policy and Procedures
- Conflict of Interest Policy
- Criminal Background Check Policy
- Disciplinary Policy
- Corporate Compliance Policy
- Incident Reporting Policy
- Whistle Blower Protection Policy

**2. Employee designation**

Hamaspik Care, Inc. is committed to the operation of an effective compliance program at all times. The Board of Directors have established a Compliance Program and identified a Corporate Compliance Officer. The CCO serves as a channel of communication to receive and direct compliance issues to appropriate resources for investigation and resolution. The CCO also serves as a final internal resource with which concerned parties shall communicate. The Corporate Compliance Officer is Ms. Leah Rosenberg.

The CCO is charged with the responsibility for developing, operating, and monitoring the compliance program. The CCO investigates compliance concerns and reports them directly to the Executive Director and to the Board of Directors at minimum on an annual basis. The members of the Board of Directors are all acquainted with the CCO through these meetings and they all have her direct office telephone number.

During the month of December of each year the CCO shall certify to OMIG that a compliance program, meeting the OMIG requirements, is in place.

**3. Training and Education**

The Hamaspik Care, Inc. Compliance Program Codes of Conduct/Ethics and Corporate Compliance policy and procedures training will be given to all affected individuals upon hire and annually thereafter. Independent contractors will be given the training upon receipt of the contract. The training is regarding the prevention, detection, and reporting of fraud and abuse. The curriculum is designed to provide individuals with an overview of the Compliance Program Codes of Conduct/Ethics and key compliance issues faced at Hamaspik Care, Inc.. The annual refresher training shall summarize any changes in Hamaspik Care, Inc.'s Compliance Program Codes of Conduct/Ethics and/or Corporate Compliance program during the prior year.

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The Human Resources (HR) or Training Coordinator shall schedule the training for all affected individuals. Affected individuals will be given a post-training quiz to assess their knowledge of the corporate compliance policies and procedures. When necessary, the HR coordinator will retrain affected individuals to ensure that the policies are properly understood. In addition to this training, the Training Coordinator or HR will talk about Corporate Compliance to individuals attending orientation training as well.

The topics covered by basic and advanced corporate compliance training will include, but not be limited to, improper or fraudulent billing for health care services, the preparation of inaccurate or incomplete cost reports, and the misuse of Hamaspik Care, Inc.'s funds. It will also consist of in-depth guidance on the fraud prevention and other compliance issues which may arise in connection with the operation of a department. Program Directors shall assist the CCO in identifying areas that require specific training.

**4. Communication lines to the CCO**

The effectiveness of our Corporate Compliance plan depends on the willingness and commitment of affected individuals in all divisions of the agency to step forward, in good faith, with questions and/or concerns. Reporting enables Hamaspik Care, Inc. to investigate potential problems quickly and to take immediate action. Our goal is that all individuals whether seeking answers to questions or reporting instances of fraud and abuse, will know who to turn to without fear of retribution.

Each affected individual has a responsibility to report any activity by any individual that appears to violate applicable laws, rules, regulations, standards of ethical practice, or the corporate compliance plan. Reporting should be done through our compliance procedures.

All affected individuals can report observed or suspected fraud or abuse directly to the Corporate Compliance Officer by either calling the direct office number 845-503-0892 or by approaching in person. They can also report **anonymously** via **email**. The email address is [CorporateCompliance@hamaspikcare.org](mailto:CorporateCompliance@hamaspikcare.org). All reports will be kept confidential.

**5. Disciplinary policies to encourage good faith participation**

Employee performance evaluations in corporate compliance as an indicator of performance and adherence to applicable laws, regulations, and policies. Hamaspik Care, Inc. expects affected individuals to report suspected misconduct to the Corporate Compliance Officer via email, hotline, or direct office number. Affected individuals are expected to cooperate with a compliance investigation and provide assistance when requested. Affected individuals are also expected to neither conduct business that is not in the full spirit of honest and ethical behaviors nor cause another individual to act or behave in such a manner, be it through inducement, suggestion, or coercion.

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If through investigating, monitoring, and/or auditing, it is determined that fraud or abuse has occurred or that an affected individual or program is violating policies and procedures as set forth in the Compliance Plan, there may be a need for disciplinary action. Failure to report misconduct or failure to assist with the resolution of compliance issues is considered a violation of the Compliance Program Codes of Conduct/Ethics. Hamaspik Care, Inc. may reprimand, suspend, or dismiss any affected individual who fails to comply with this policy. All disciplinary policies will be firmly and fairly enforced. Hamaspik Care, Inc.'s disciplinary guidelines are outlined in the Personnel Policy and Procedures.

**6. System for routine identification of compliance risk areas**

Hamaspik Care, Inc.'s Quality Assurance department will conduct internal audits of each program on a quarterly basis, to ensure documentation complies with established requirements, to ensure quality of service provided and to identify potential and emerging risk areas. The QA Director shall select and audit ten percent of programs billing/transactions. All findings shall be shared with the Executive Director/Administrator and the supervisors of programs involved. The entire audit process is detailed in the Internal Control Policy and Procedures..

In addition, external audits of all programs are performed on an annual basis by an accounting firm with experience in auditing Medicaid provider agencies. These audits will serve to identify potential and emerging compliance risk areas.

**7. System for responding to compliance issues**

Hamaspik Care, Inc. has developed a tracking system for all questions or concerns that come to the responsible compliance person. All reports of fraudulent, abusive, or other improper conduct made via email, hotline, or direct office number, will be reviewed to determine whether the report warrants an investigation.

Upon receiving a complaint or upon the discovery of suspected misconduct, the CCO shall immediately contact the Executive Director and thereafter conduct a thorough investigation. All affected individuals are expected to cooperate with the investigation and provide assistance when requested. Records of such investigation will contain documentation of the alleged violation, a description of the investigative process, copies of interview notes and key documents, and the results of the investigation.

The results of the investigation shall be shared with the supervisor of the department where the fraudulent activity occurred and the Executive Director. The department's supervisor will be required to ensure that the problem is corrected promptly and set a system in place to reduce the risk of recurrence. When the issue is resolved, the supervisor shall notify the CCO. If the issue requires refunding of an overpayment or fraudulent billing, the CCO shall contact the Hamaspik Care Inc. fiscal office to ensure

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repayment. The Executive Director will review the outcome with the Board of Directors and consult with the Board of Directors and/or legal counsel to determine whether voluntary self-disclosure to the appropriate government agency is warranted.

If through investigating, monitoring, and/or auditing, it is determined that fraud or abuse has occurred, or that an affected individual or program is violating policies and procedures set forth in the Compliance Plan, there may be a need for disciplinary action.

**8. Policy of Non-Intimidation, Non-Retaliation and Whistleblower Protection**

An individual/whistleblower who files or intends to file a report to the CCO under this policy in good faith, or conducts an investigation, evaluation, audit, or any other remedial activity under the compliance program, may not be subject to retaliation or intimidation in any form. No affected individual may threaten to or actually intimidate or retaliate against another individual for filing or intending to file a report in good faith, or for conducting an investigation, evaluation, audit, or any other remedial activity under the compliance program. Retaliation/intimidation is also prohibited against an individual for refusing to carry out any activity which is the subject of a pending compliance investigation.

Prohibited actions include, but is not limited to, terminating, suspending, demoting, failing to consider for promotion, harassing, reducing compensation, discriminating, or any other adverse actions. Retaliation/intimidation is prohibited even if it is determined that the allegedly improper conduct was indeed proper or entirely did not occur, provided that the report was made in good faith. Hamaspiik Care, Inc. reserves the right to take disciplinary action against any affected individual who maliciously files a report he/she knows to be untrue.

Allegations of intimidation or retaliation against individuals who raise compliance issues should be reported directly to the CCO as soon as possible. Any such allegation will be promptly investigated impartially and objectively by the Corporate Compliance Officer. Remedial action will be taken to rectify unlawful retaliation, based upon the results of the investigation.