



Performing Provider System (PPS)

Westchester Medical Center Health Network

DSRIP Program Compliance Manual

Effective: 12/15/2015

Page 1

References: Deficit Reduction Act of 2005; NYS Social Services Law § 363-d; 10 18 NYCRR Part 521; OMIG DSRIP Program Compliance Guidance 2015-01, OMIG DSRIP Program Guidance 2015-02

I. Introduction

As a lead organization in the Delivery System Reform Incentive Payment Program (“DSRIP Program”), Westchester Medical Center Performing Provider System (“WMC PPS”) is required to have an effective DSRIP compliance program so that Medicaid funds distributed as part of the DSRIP Program are not connected with noncompliant behavior or fraud, waste or abuse. WMC PPS is responsible for making submissions to New York State agencies, receiving DSRIP Program payments, and distributing those payments to WMC PPS providers (“PPS Providers”). WMC PPS is committed to submitting accurate information, based on truthful and complete documentation, in order to receive DSRIP Program payments. WMC PPS and PPS Providers are responsible for ensuring that individuals engaging in DSRIP Program-related activities on their respective behalf (including employees, agents, and contractors”) (“Representatives”) do not knowingly present or cause to be presented documents or claims for DSRIP Program payments that are fictitious or fraudulent or based on inaccurate information. WMC PPS complies, and requires all of the PPS Providers to comply, with all applicable laws, rules, regulations, and DSRIP Program policies and procedures when submitting documentation, providing any patient encounter or service to support any DSRIP Program payment, or performing any other DSRIP Program activity.

To that end, WMC PPS has implemented a DSRIP compliance program (the “Compliance Program”), which will operate in accordance with this DSRIP Program Compliance Manual (“Manual”) to make certain that the Compliance Program as a whole, and each PPS Provider individually, perform DSRIP Program services and activities pursuant to the highest ethical, business and legal standards.

Obligations imposed by this Manual are in addition to obligations of PPS Providers under their own compliance programs or relevant policies, to the extent such programs and policies are required by law.

II. Role of WMC PPS Executive Committee

The WMC PPS Executive Committee (the “Executive Committee”) is charged with sharing the responsibility for oversight of the Compliance Program and recognizes its duty to undertake reasonable efforts to ensure that the Compliance Program is effective, to learn about potential weaknesses, and ensure that problems are identified and addressed. The Executive Committee is committed to allocating necessary resources to the Compliance Program, supporting Compliance Program initiatives, and reinforcing a culture of compliance at each of the PPS Providers.

The WMC PPS Compliance Officer (“Compliance Officer”) reports to the Executive Committee at least quarterly with respect to Compliance Program activities, including but not limited to, a summary of investigations, corrective actions, and compliance efforts undertaken during the prior year. The Compliance Officer also reports at least annually to the Executive Committee on the overall effectiveness of the Compliance Program.

II. Written Policies and Procedures

This Manual provides an overview of the Compliance Program and imposes obligations on WMC PPS and each of the PPS Providers regarding the operation of the Compliance Program, compliance expectations of, and communication of the Compliance Program to, Representatives, the identification and reporting of compliance related issues, and WMC PPS oversight of the Compliance Program and each PPS Provider's adherence to this Manual. The objective of the Compliance Program is to ensure that PPS, PPS Providers, and their respective Representatives comply with this Manual and WMC PPS Code of Conduct ("Code").

The Compliance Officer will provide each PPS Provider with this Manual as well as the Code. Each PPS Provider is responsible for distributing this Manual and the Code to its Representatives at hire or engagement, when the Manual and Code are updated, and annually thereafter.

III. Designation of Compliance Officer and PPS Compliance Liaisons

The Compliance Officer is designated as the compliance officer for DSRIP and has overall responsibility for the Compliance Program, including the responsibility to ensure that each PPS Provider adheres to this Policy. For purposes of Compliance Program oversight, the Compliance Officer shall report at least quarterly to the Executive Committee.

Each PPS Provider shall designate a Representative, to be responsible for the PPS Provider's implementation of, and adherence to, this Manual and the Compliance Program as a whole at its organization ("PPS Compliance Liaison"). Each PPS Provider shall furnish the name of its PPS Compliance Liaison to the Compliance Officer within fifteen (15) days of the effective date of this Policy and within thirty (30) days of any change to this designation.

In accordance with this Policy, the PPS Compliance Liaison shall cooperate with, and provide requested information to, the Compliance Officer.

IV. Code of Conduct

The Code, a central part of the Compliance Program, sets forth the standards of conduct that all Representatives are expected to follow. Representatives should adhere to both the spirit and the language of the Code, maintain a high level of integrity in their conduct, and avoid any conduct that could reasonably be expected to reflect adversely upon the integrity of WMC PPS.

A. General Standards

1. Compliance with Standards – Honest, Ethical and Lawful Conduct

All Representatives associated with WMC PPS are expected to comply and be familiar with all federal and state laws, rules, and regulations that govern their job or work with WMC PPS. All Representatives must avoid any illegal conduct,

both in business and personal matters, and should not take action that they believe may be in violation of any law, rule, or regulation. If Representatives are unsure whether an action is lawful, they should not engage in it until they check with their supervisor, manager, or the Compliance Officer.

In addition, all Representatives must comply with the standards of conduct set forth in this manual. Strict compliance with these legal and compliance standards is a condition of employment or participation in the WMC PPS, and any violation of any of these standards of conduct will result in discipline being imposed.

2. Cooperation with the Compliance Program

The Compliance Program will work effectively only if everyone works together to ensure its success. Therefore, we require that Representatives cooperate fully with this effort. In particular, Representatives must cooperate with all inquiries concerning possible improper business, responses to reviews or inquiries, and actively work to correct improper practices that are identified.

3. Business Records

Management must ensure that all business records are accurate and truthful, with no material omissions. Similarly, all reports submitted to governmental agencies will be accurate in every manner.

B. Standards Relating to Confidentiality

1. Confidential Patient Information

All Representatives must abide by the privacy standards that protect patient health information, as set forth in the federal Health Insurance Portability and Accountability Act of 1996 (“HIPAA”) and other federal and state statutes and regulations, including rules concerning HIV/AIDS, drug/alcohol and mental health information.

Representatives have a duty to protect the confidentiality of patient information at all times in the course of their work or responsibilities. Representatives must contact the Compliance Officer if they know of any allegation of improper use or disclosure of HIPAA privacy or security. No Representatives shall take it upon themselves to investigate HIPAA privacy or security issues unless authorized to do so at the direction of the Compliance Officer.

2. Confidential Business Information

Confidential information acquired by Representatives about the business of WMC PPS must also be held in confidence and may not be used as a basis for personal gain by the Representative, their families or others. Such information includes, but is not limited to: development plans, marketing strategy, financial data,

proprietary research and information about pending or contemplated business deals.

Other than in connection with Representatives' discharge of their official responsibilities for WMC PPS, all Representatives must refrain from disclosing any such information other than is permitted by or to further the interests of WMC PPS.

V. Training and Education

The Compliance Officer is responsible for ensuring that the Executive Committee and Representatives are trained with respect to this Manual, as well as general and DSRIP-specific compliance. The Compliance Officer or his/her designee, shall train any new Executive Committee members within thirty (30) days of appointment. The Compliance Officer will provide each WMC PPS Compliance Liaison with materials to facilitate the required training to Representatives to meet this standard. The PPS Compliance Liaison shall provide annual training to all Representatives. The first such training shall be provided within ninety (90) days of the effective date of this Manual; all new Representatives must receive such training within ninety (90) days of hire. The PPS Compliance Liaison or his/her designee shall also provide training to all Representatives within ninety (90) days of any material revisions to this Manual, on an ad hoc basis to address certain issues or concerns, and/or as directed by the Compliance Officer. The PPS Provider will require each Representative to sign an attestation attesting to the receipt of the compliance documents and the training. The PPS Compliance Liaison will collect and maintain such attestations and provide an annual attestation to the Compliance Officer attesting to the PPS Provider's fulfillment of this requirement.

VI. Communication Lines

The Compliance Program enables and provides for open lines of communication between the Compliance Officer and the PPS Compliance Liaisons and encourages individuals to report concerns related to potential or actual violations of this Manual, the DSRIP Master Services Agreement, potential fraud, waste or abuse, or applicable law or regulation.

In furtherance of this Manual, Representatives may report DSRIP Program related compliance issues or concerns to their WMC PPS Compliance Liaison or to the Compliance Officer through the WMC PPS Compliance Help-Line. Each WMC PPS Compliance Liaison is required to publicize the WMC PPS Compliance Help-Line to its Representatives in the same manner in which the PPS Provider publicizes its own compliance program contact information. Such publication shall include, without limitation, posting the Compliance Help-Line in new Representative orientation materials, on any corporate intranet site, and in communal locations such as lunchrooms, waiting areas, and hallways. The WMC PPS Compliance Help-Line is a 24-hour, toll-free confidential helpline that allows for confidential and anonymous reporting. However, the WMC PPS Compliance Help-Line is not intended to replace existing channels for handling employee grievance issues or questions. The focus of the Help-Line is to facilitate reporting of DSRIP Program-related noncompliance, fraud, waste, or abuse.

Regardless of the channel used, if a Representative raises a DSRIP Program-related concern, it is the PPS Provider's responsibility to:

- Escalate the question to the PPS Compliance Liaison, who shall address the question if possible;
- Consult with the Compliance Officer if the question cannot be answered; and
- Promptly present a suspected violation or potential fraudulent, wasteful, or abusive behavior to the Compliance Officer.

VII. Responding to Compliance Issues

Upon receipt of a DSRIP Program-related compliance concern, the PPS Compliance Liaison must promptly notify the Compliance Officer. The Compliance Officer will review the report and determine whether it should be investigated and by whom (e.g., the Compliance Officer, the PPS Compliance Liaison, PPS Provider, or legal counsel). Regardless of who investigates the report, the Compliance Officer is responsible for confirming that an investigation of each report commences promptly. A report of the outcome of the investigation must be provided to the Compliance Officer. The Compliance Officer shall report compliance or fraud, waste or abuse concerns to the Executive Committee.

VIII. Disciplinary Policies and Procedures

Each PPS Provider is required to maintain a disciplinary policy and procedure that, at a minimum, (a) encourages good-faith participation in the Compliance Program; (b) imposes discipline on any individual who does not adhere to this Policy or who has violated DSRIP Program requirements, agreements or other policies or who has engaged in activities that are, or lead to, noncompliance, fraud, waste or abuse; and (c) ensures that discipline is enforced on a timely, consistent and fair basis, regardless of the person's level or position. The PPS Compliance Liaison will ensure that the PPS Provider's disciplinary policy is made available to Representatives.

Each PPS Compliance Liaison, on behalf of its PPS Provider, will attest that the PPS Provider has a disciplinary policy and procedure that meets this requirement and that such policy is made available to Representatives. Any material revisions to such policy and procedure shall also be submitted to the Compliance Officer within thirty (30) days of the effective date of the revision(s).

IX. Monitoring, Auditing and Corrective Action

WMC PPS employs various methods to prevent and detect incidents of DSRIP Program noncompliance, including those involving potential fraud, waste, and abuse involving DSRIP Program funds, including, without limitation, routine monitoring and auditing of areas determined to be high or medium risk, and investigating reports of noncompliance and fraud, waste and abuse. The Compliance Officer may also require the PPS Compliance Liaisons to perform certain monitoring and auditing activities of their respective PPS Providers' DSRIP

Program activities and submissions. Additionally, the Compliance Officer may audit a PPS Provider at any time to ensure compliance with this Policy.

Beginning in the fourth quarter of each year, the Compliance Officer, with the assistance of the PPS Compliance Liaisons, performs a risk assessment and develops a work plan for planned monitoring and auditing of the Compliance Program. In performing its risk assessment, at a minimum, the following documents and information are considered and incorporated where appropriate:

- DSRIP Program agreements;
- New York Department of Health and New York Office of Medicaid Inspector General (OMIG) Guidance Documents;
- Prior year's reported issues of noncompliance or fraud, waste, and abuse;
- Upcoming submissions and certifications; and
- Compliance Program monitoring and auditing results.

The Compliance Officer will seek input from the Compliance Committee and the Executive Committee in selecting areas to monitor and audit. PPS Providers also may suggest to the Executive Committee or the Compliance Officer areas that they believe should be monitored or audited to ensure compliance.

Based on an evaluation of the likelihood and potential impact of certain risks and input from the Compliance Committee, the Executive Committee, and PPS Providers, the Compliance Officer shall develop the WMC PPS compliance work plan ("Work Plan"). The Compliance Officer shall report progress on activities undertaken pursuant to the Work Plan to the Compliance Committee and the Executive Committee on at least a quarterly basis. The Work Plan shall be evaluated at least semiannually to ensure that it continues to be achievable and focused on the most risky areas.

Using the results of monitoring and auditing activity, the Compliance Officer, with the support of the PPS Compliance Liaisons, where appropriate, shall develop appropriate follow-up action, which may include but is not limited to: development and implementation of a corrective action plan, recommendation of employee discipline or termination, additional training or communications to reinforce Compliance Program requirements, revisions of certain standards, adjustments to information submitted to government agencies, and/or disclosure to appropriate government agencies. In cases where the results of an auditing or monitoring activity require disclosure to a government agency regarding the Compliance Program or any PPS Provider's DSRIP Program-related activities, the Compliance Officer and the WMC PPS General Counsel or outside counsel, as may be appropriate, will present their recommendations to the CEO and the Executive Committee; however, the Compliance Officer and WMC PPS General Counsel will have final authority regarding whether to make the disclosure.

X. Non-Intimidation and Non-Retaliation

Each PPS Provider is required to maintain a non-intimidation and non-retaliation policy, also known as a "Whistleblower Policy," prohibiting retaliation or intimidation of any person who in

good faith reports actual or suspected violations of applicable Federal or State laws or regulations, internal policies or procedures, or this Manual. Each PPS Compliance Liaison will ensure that the PPS Provider's Whistleblower Policy is made available to Representatives at hire, on an annual basis thereafter, and any time material changes are made.

Each PPS Compliance Liaison, on behalf of its PPS Provider, will attest that the PPS Provider has a Whistleblower Policy and that such policy is made available to Representatives. Any material revisions to the Whistleblower Policy shall also be submitted to the Compliance Officer within thirty (30) days of the effective date of the revision(s).

XI. Annual Attestation Process

By March 31st each year, each PPS Provider shall submit to the Compliance Officer a completed and signed attestation that certifies to, among other things, compliance with each of the requirements set forth in this Manual. Failure to submit the attestation shall be reported to the Executive Committee and be considered a breach of the DSRIP Master Services Agreement. The Compliance Officer shall maintain hard or electronic copies of all attestations.

XII. Record Retention

All files related to DSRIP Program compliance and created pursuant to this Manual must be maintained for at least ten (10) years from the date of creation or for a longer period of time as may be required by applicable law or regulation.

XIII. Policy Revisions

This Manual shall be reviewed by the Compliance Officer and the Executive Committee on at least a biannual basis. The Compliance Officer and Executive Committee jointly will be responsible for ensuring that this Manual is up to date and receives all necessary approvals.

XIV. No employment or engagement of excluded entities or persons

No PPS Provider may employ, contract, subcontract or make payments using DSRIP Program funds to any person who is an ineligible person identified on the GSA EPLS, OIG's Cumulative Sanction Report, or the OMIG Terminations and Exclusions Lists. Accordingly, the PPS Provider must screen all of its employees, contractors, subcontractors, agents and vendors against all of these lists on a monthly basis, report any ineligible person to the Compliance Officer, and immediately remove such person from involvement in the DSRIP Program.

XV. Accuracy, Retention and Destruction of Books and Records

All Representatives are responsible for the integrity and accuracy of DSRIP Program documents and records. Because many of the PPS Providers' records serve, directly or indirectly, as a basis for DSRIP-Program payments, it is mandatory for regulatory and legal compliance as well as good business practice that all records be accurately completed and maintained. No one may

falsify information on any record or document under any circumstances. All documents generated by PPS Providers to support receipt of a DSRIP Program payment must be maintained by PPS Providers in compliance with these standards and applicable laws, regulations and guidance, whichever has more stringent retention requirements.

ACKNOWLEDGMENT OF RECEIPT

I, a Representative as defined in this Manual, acknowledge that I have received a copy of the WMC PPS Compliance Manual.

I agree to read the Manual, to conduct myself in conformity with all of its requirements, to adhere to the spirit and letter of the Code of Conduct, and to cooperate with management in carrying out the objectives of the compliance program.

Acknowledged and agreed:

Signature

Print name

Job Title

Department/Division