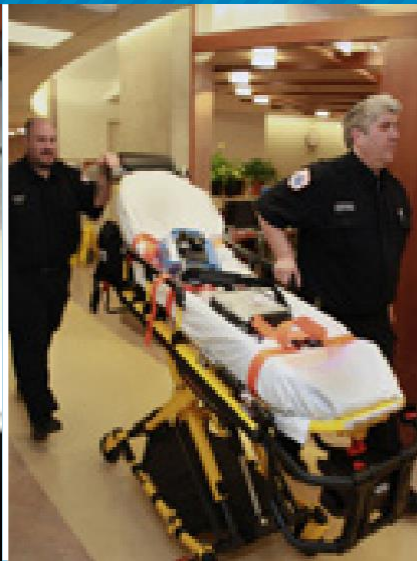


# Corporate Compliance Program GUIDELINES



Kenneth D. Gibbs, President & Chief Executive

Sandra Maliszewski, Vice President, Chief Compliance & Privacy Officer

Laurie E. Weinstein, Executive Vice President & Chief Legal Officer



Maimonides  
Health

## I. COMPLIANCE PROGRAM GUIDELINES

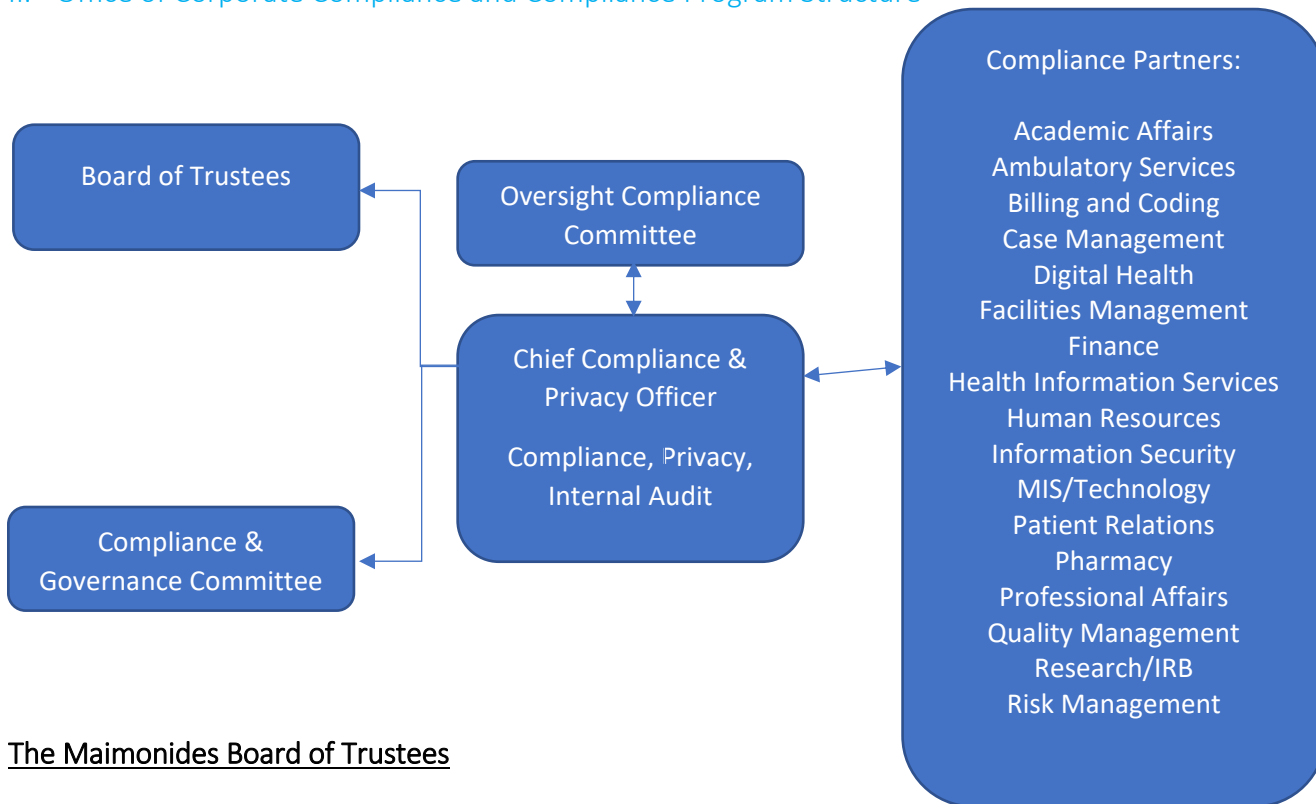
### Introduction

Maimonides Health (Maimonides) has a longstanding history of providing high quality healthcare to patients in Brooklyn and beyond. Our Corporate Compliance Program (the “Compliance Program”) supports our efforts to provide this care and conduct business in a lawful and ethical manner. The Compliance Program is integrated into the fabric of our operations and supported by the highest levels of leadership at our organization, including the Chief Executive Officer, members of senior management, and the Maimonides Board of Trustees (“Board”). The purpose of the Corporate Compliance Program Guidelines (the “Compliance Guidelines”) is to provide an overview of our Compliance Program. Section II describes the role of the Board and various committees and departments that are responsible for overseeing and managing the Compliance Program. Section III discusses the elements of our Compliance Program, which are consistent with guidance issued by the Office of Inspector General and Office of the Medicaid Inspector General as well as requirements set forth in the Health Insurance Portability and Accountability Act (HIPAA), the Affordable Care Act (ACA), the Health Information Technology for Economic and Clinical Health Act (HITECH), and the Stop Hacks and Improve Electronic Data Security Act (NY SHIELD Act). Our Compliance Guidelines help us to prevent and detect fraud, waste, and abuse and comply with Medicaid and other payor program requirements.

### Scope

All employees, members of the medical staff, students, trainees, physician office staff, contractors, volunteers, trustees and other persons performing work for or at Maimonides must be familiar with and abide by the Compliance Guidelines.

## II. Office of Corporate Compliance and Compliance Program Structure



### The Maimonides Board of Trustees

The Board is responsible for guiding the Compliance Program, supporting its initiatives, and allocating proper funding and resources to the Office of Corporate Compliance (“OCC”).

The Board has appointed the Compliance and Governance Committee (the “Committee”), described below, to oversee the effectiveness of the Compliance Program and advise the Chief Compliance and Privacy Officer (“CCO”). The Board is responsible for reviewing periodic reports from the Committee that summarize findings from the Office of Corporate Compliance’s compliance-related activities, as delineated within the Corporate Compliance Workplan.

### Compliance and Governance Committee of the Board

This Committee assists the Board in monitoring the Compliance Program to ensure that Maimonides takes appropriate steps to correct or mitigate compliance-related deficiencies that the OCC identifies. Periodically, the Committee receives reports from the CCO concerning significant compliance issues, such as the results of compliance investigations and management’s response to those reports. The Committee also reviews the results of the annual Corporate Compliance Risk Assessment the OCC prepares and approves annual compliance and internal audit

workplans created as a result of that risk assessment (together the “Corporate Compliance Workplan”). In addition, the Committee oversees and assists in the implementation of Maimonides’ Conflict of Interest process. The Committee meets quarterly at a minimum and makes regular reports to the Board.

### **Oversight Compliance Committee**

The Oversight Compliance Committee, comprised of members of senior management, supports the CCO in fulfilling her responsibilities and reports to the Committee. Specifically, the Oversight Compliance Committee helps to identify Maimonides’ risk areas; ensure that employees, medical staff members, physicians, contractors, and other relevant persons receive and complete applicable compliance-related training and education in a timely manner; ensure that internal and external audits take place as/when appropriate; address compliance-related matters identified in the annual Corporate Compliance Workplan; advocate for the allocation of sufficient funding and resources to support the Compliance Program; ensure that Maimonides has effective systems and processes in place to identify compliance risks, overpayments and other issues; implement effective policies and procedures for correcting and reporting such issues; and advocate for adoption and implementation of required modifications to the Compliance Program. The Oversight Compliance Committee, chaired by the CCO, meets quarterly at a minimum and meets on an ad hoc basis, as necessary.

### **The Chief Compliance and Privacy Officer**

The CCO oversees the day-to-day operations of the Compliance Program and Office of Corporate Compliance. The CCO’s primary responsibilities include: (1) overseeing and monitoring the adoption and implementation of the Compliance Program, including evaluating its effectiveness; (2) drafting, implementing, and updating (on at least an annual basis or, as otherwise necessary, to conform to federal and state laws, rules, regulations, policies and standards) the Corporate Compliance Workplan; (3) reviewing and revising Maimonides’ compliance-related policies, procedures and standards of conduct, to reflect changes in federal and state laws or in response to organizational needs; (4) helping to establish methods to reduce Maimonides’ vulnerability to fraud, waste and abuse; and (5) coordinating internal investigations and documenting, reporting, and pursuing any necessary resulting corrective action.

In addition, the CCO reviews, assigns and resolves compliance-related investigative matters received via the Compliance Hotline and other sources. As necessary, representatives from Information Security, the Office of Legal Affairs, and Human Resources participate in this process. The CCO reports compliance related activities to the Oversight Compliance Committee and the Committee to ensure the appropriate bodies and persons are informed of compliance-related matters.

## The Office of Corporate Compliance

The OCC carries out the day-to-day implementation of the Compliance Program. The OCC staff is comprised of a team of ethics and compliance professionals who are experienced in the areas of coding, billing, auditing, investigations, ethics, and quality of care. The OCC is responsible for the following compliance activities:

- Implementing Maimonides' Conflicts of Interest ("COI") process to identify and manage conflicts of interest that might impact or appear to impact how Maimonides' does business.
- Ensuring Maimonides' compliance with federal and state privacy laws and regulations like HIPAA, HITECH and the NY SHIELD Act.
- Drafting, reviewing (on at least an annual basis) and revising written policies and procedures and standards of conduct that articulate Maimonides' commitment and obligation to comply with federal and state laws, including the Federal Deficit Reduction Act.
- Analyzing and performing trending analyses on calls and reports made to the Compliance Hotline and other sources.
- Conducting and/or coordinating internal investigations.
- Convening quarterly meetings of the Compliance Partners Committee, which consists of departmental management staff, to review potential compliance risk areas related to human resources, revenue cycle, coding, pharmacy, credentialing, environment of care, digital health, ambulatory services, laboratory, and management information systems.
- Monitoring Maimonides' adherence to research laws, regulations, and guidelines involving human subjects to satisfy ethical standards and protect participant rights.
- Overseeing exclusion and sanction screening of employees, contractors, vendors, and other affiliates of a healthcare entity to determine whether they are listed on any federal or state exclusion lists.
- Monitoring compliance-related federal and state statutory and regulatory developments in coordination with the Office of Legal Affairs, Human Resources, Risk Management, Information Services and other departments.
- Ensuring that departments within Maimonides have developed appropriate written policies and procedures addressing relevant compliance-related issues.
- Advising the Oversight Compliance and Compliance and Governance committees on compliance-related issues.
- Performing an annual Corporate Compliance Risk Assessment to identify and mitigate potential risks in areas such as billing, payments, ordered services, medical necessity and quality of care, governance, mandatory reporting, credentialing, contractor, subcontractor, agent or independent contract oversight, privacy and security of data.

- Developing the Corporate Compliance Workplan.
- Performing risk-based audits and developing and monitoring corrective action plans.
- Providing general enterprise-wide compliance education, training, support, and resources.
- Developing and providing compliance-related onboarding education to new providers and staff.
- Providing targeted risk-based compliance education to the affiliated faculty practices, including M2C, P.C. physician practices.

### III. COMPONENTS OF MAIMONIDES' CORPORATE COMPLIANCE PROGRAM

The Compliance Program operates effectively when it successfully deters non-compliance with federal and state laws and ethical requirements; detects violations of the law and ethical standards; and assures the prompt and appropriate response to any identified violations. To meet the goals as outlined, the Compliance Program follows guidance issued by the federal Office of the Inspector General (OIG) and the New York State Office of the Medicaid Inspector General (OMIG). Our Compliance Program incorporates the following the elements of an effective compliance program:

1. **Written Policies and Procedures** including a *Code of Conduct* adopted by the Board, which establishes standards of behavior and provides guidance on legal, regulatory, and ethical requirements. Written policies regarding confidentiality, non-intimidation, and non-retaliation extend to all persons who report compliance issues, including Medicaid recipients of service.
2. **Designation of a Compliance Officer** who is vested with responsibility for the day-to-day activities of the Compliance Program and helps to ensure that the Compliance Program is well-integrated into Maimonides' operations.
3. **Training and education** on the *Code of Conduct* and other topics, such as potential risk areas, compliance-related policies and procedures, CCO and Oversight Compliance Committee roles, internal reporting of potential compliance issues, and claim, coding, and billing requirements. The OCC also customizes compliance training for Maimonides staff, contractors, and vendors.

Compliance training and education are documented in an annual training plan that outlines:

- a. required subjects or topics,
- b. the timing and frequency of training provided,
- c. which affected individuals are required to attend the training(s),

- d. how attendance is tracked, and
  - e. how the effectiveness of the training is periodically evaluated
4. Establish and implement effective **lines of communication** to include telephone, email, website-based correspondence, mail, face-to-face, or any other reasonable means of communication. Maimonides creates an environment in which anyone who reports a compliance issues in good faith should have a reasonable expectation that their communication will be kept confidential, whether requested or not. Maimonides does not tolerate any retaliation or intimidation against anyone who raises a compliance-related concern in good faith.
  5. Conduct **internal monitoring and auditing** to prevent, detect, and correct non-compliance with Medicare and Medicaid program requirements, including fraud, waste, and abuse that are most likely to occur within Maimonides' identified risk areas.
  6. Maimonides has **established disciplinary standards** and implemented enforcement procedures to address potential violations and encourage good-faith participation in the Compliance Program by all employees and other relevant individuals.
  7. A system to promptly **respond to compliance issues** and implement corrective actions, including refunding overpayments to Medicare/Medicaid or other payor programs, address or mitigate identified compliance-related problems, and prevent future violations identified during an internal or external audit.

#### A. THE CODE OF CONDUCT & WRITTEN COMPLIANCE POLICIES

The Code of Conduct (the "Code") is the cornerstone of the Compliance Program. The Code governs our relationships with patients, affiliated physicians, third-party payors, vendors, sub- contractors, independent contractors, consultants, and one another, and applies to all employees, trustees, and agents of Maimonides, Maimonides Research and Development Foundation, MMC Holding of Brooklyn, Inc., and M2 Medical Community Practice, P.C., including medical and professional staff, residents, fellows, trainees, volunteers, trustees, consultants, suppliers and vendors. The Code provides guidance to employees and others on dealing with potential compliance issues, identifies how to escalate compliance-related concerns to appropriate compliance personnel and describes the process for investigating, resolving and/or mitigating issues. It describes the principles by which Maimonides expects employees to conduct their work. The OCC reviews the Code regularly to ensure its accuracy and update it as necessary.

The Code is distributed to applicable persons during the on-boarding process, either electronically or in hard copy. Every new hire must certify that they have received and

reviewed the Code and will comply with it and related policies. Current employees must also recertify the same during mandatory Annual Compliance Training. The Code is available on the Intranet and Internet, and on the Office of Corporate Compliance webpage.

In addition to the Code, the OCC and other departments issue, review and revise targeted policies related to potential risk areas (e.g., policies governing coding and billing functions and Medical Staff by-laws regulating Medical Staff members.)

## B. TRAINING AND EDUCATION

### • New Hire and Annual Compliance Training

The OCC develops and maintains a compliance training plan, which outlines the subjects and topics for training and education, the timing and frequency of the training, which affected individuals are required to attend, how attendance will be tracked, and how OCC will periodically evaluate the effectiveness of the training.

The OCC implements Annual Compliance Training for employees through Maimonides' online Management Learning Platform. The program provides training on various topics, such the role of the CCO and the operations of the Compliance Program (including how to report potential compliance issues); the Code; compliance with fraud, waste and abuse laws, HIPAA and other privacy laws, and IT Security. The program stresses the affected individual's obligations to comply with the Code; cooperate with internal investigations; report suspected illegal or improper conduct; Maimonides' prohibition against intimidation and retaliation for good-faith reporting of compliance concerns; disciplinary standards; and other compliance-related training and education.

### • Focused Training

The OCC coordinates focused training sessions for departments, including those involved in high-risk areas (e.g., billing, coding). Maimonides also requires providers to complete training on fraud, waste and abuse awareness.

### • General Communications

The CCO develops and promotes written content such as "Compliance Alerts" that address compliance-related issues. All communications reiterate Maimonides' commitment to the Compliance Program and employee, and other relevant individuals', responsibility to comply with legal and ethical standards.

## C. CHANNELS FOR REPORTING VIOLATIONS

The Compliance Program provides employees and other affected individuals with several



options to report suspected violations or seek help if they have questions. Employees are encouraged to raise concerns first with their supervisor or department head. If the employee is uncomfortable with that approach or thinks it would be inappropriate, they should call the OCC, contact the CCO directly, or call the Compliance Hotline (discussed below). All training sessions and New Hire Orientations emphasize the 24/7 availability of the Compliance Hotline and its confidential-reporting feature.

- **Manager's Responsibility**

Managers must respond to all compliance-related concerns raised by a staff member or other affected individual. If the manager is unsure of how to respond to the concern, they should refer the individual to the OCC. It is the manager's responsibility to ensure that every compliance-related issue raised by a staff member or other affected individual under the manager's supervision is addressed or referred to the appropriate persons. Maimonides prohibits managers from retaliating against any employee who reports a compliance-related concern in good faith.

- **Compliance Hotline**

The Compliance Program maintains a 24-hour, toll free Compliance Hotline (800-585-7970), The Hotline is also available by visiting [www.maimo.ethicspoint.com](http://www.maimo.ethicspoint.com) or via mobile device using a QR code.

Any person with a compliance-related concern can make a report to the Compliance Hotline; reports may be made anonymously or non-anonymously. Staffed by an outside company, the Compliance Hotline specialists will take the caller's report and ask follow-up questions to gather additional information if necessary. Anonymous callers will be assigned an identification number which permits them to check on the response to their concern. Callers are not required to give their name although they are encouraged to do so. No calls will be traced or recorded. The confidentiality of persons reporting compliance issues shall be maintained unless the matter is subject to a disciplinary proceeding, referred to, or under investigation by a regulatory agency, law enforcement, or disclosure is required during a legal proceeding. The Compliance Hotline specialists will post all case information from each call to the designated secure web-based reporting portal for review and processing by the OCC.

#### **D. INVESTIGATORY PROCESS**

The OCC reviews each report forwarded from the Compliance Hotline or other sources or made directly to the CCO. The CCO or the CCO's designee will either personally conduct the investigation, or refer it to the appropriate department (e.g., Office of Legal Affairs, Finance, Human Resources). If the OCC determines the report does not require further investigation, the OCC will document the reason for the determination. If the OCC believes the presence of

an employee under investigation impedes the investigatory process, the employee will be reassigned until the investigation is completed.

The OCC and/or the investigating department will maintain a complete file of all steps taken during the investigatory process, including written statements of interviews, with the date and name of interviewee, interviewee notes and documents reviewed. Where investigations are conducted by other departments, the investigating department will advise the OCC of the investigation's progress.

The OCC maintains records of compliance-related reports and investigations for 10 years.

#### E. CORRECTIVE ACTION

Maimonides has procedures and systems for thoroughly and promptly responding to compliance issues that arise. Where an investigation substantiates a reported violation, Maimonides will take corrective action to correct the problem. Depending on the nature of the violation, corrective action may take the form of implementing policies and/or systems as necessary to reduce the potential for recurrence; conducting additional audits or other monitoring; terminating a relationship with a vendor; progressive discipline up to and including termination; training and education; refunding overpayments; or notifying appropriate government agencies of the error or wrongdoing. In cases that require reporting to a government agency, the OCC and Office of Legal Affairs will advise Maimonides' Chief Executive Officer of the issue and the proposed report and planned corrective action. The OCC also reports the progress of corrective action plans that address identified deficiencies to the Oversight Compliance and Compliance & Governance committees.

#### F. DISCIPLINARY ACTION

Maimonides has established disciplinary policies, standards and procedures to address potential violations. These policies outline the possible sanctions for behavior found to have violated a law, ethical standard or Maimonides policy covered by the Code of Conduct, including policies on patient privacy. These policies also establish standards for escalating disciplinary actions for such behavior. Maimonides is committed to applying disciplinary action in a consistent and fair manner. The OCC, in consultation with the Human Resources Department and other relevant department, determines appropriate discipline related to a violation on a case-by-case basis. Disciplinary action may take the form of:

- Verbal warnings
- Written warnings
- Retraining, reassignment, or modification of job responsibilities
- Suspension without pay
- Restitution

- Termination (or revocation of Medical Staff privileges for Medical Staff members)
- Termination of a contract or replacement of personnel

Compliance-related disciplinary actions will be documented in the employee's file and within OCC's investigation file.

## G. MONITORING AND AUDITING

### • Generally

An ongoing evaluation process is critical to a successful Compliance Program. The OCC works with the Oversight Compliance Committee and other stakeholders (e.g., Compliance Partners) to identify compliance-related risk areas and conduct related audits.

The OCC performs an annual enterprise-wide risk assessment that incorporates efforts from Internal Audit, which concentrates on financial, operational, and cyber/information technology (IT), and financial risks within the organization, alongside Compliance that targets regulatory risks. This coordinated approach enhances our ability to (1) identify known and potential financial and ethical risks to the organization, (2) manage those risks, and (3) mitigate diverse compliance risks effectively. Upon completion of the risk assessment, OCC develops and implements a comprehensive integrated workplan (the "Corporate Compliance Workplan"). The OCC shares the results of internal or external audits with the Oversight Compliance Committee as well as the Compliance and Governance Committee.

The OCC encourages employees to contact the OCC with issues or practices they believe should be surveyed or reviewed.

The OCC conducts provider risk-based documentation and coding reviews and focused training annually with ongoing monitoring, as necessary.

The OCC also conducts periodic reviews of vendor relationships, billing, and coding, reimbursement and cost reporting, and subjects which are the focus of Medicare/ Medicaid intermediaries or carriers and law enforcement agencies (e.g., arrangements with physicians and physician-owned entities, subjects of OIG Special Fraud Alerts, OMIG/OIG workplans), or industry developments. The OCC may conduct audits internally or engage outside consultants; such audits may take the form of focused reviews (e.g., staff and management interviews, questionnaires, auditing claims for reimbursement and trending analyses) or random sampling.

### • Exclusion and Background Checks

As part of the ongoing monitoring and audit process, Maimonides periodically screens affected individuals and entities (e.g., employees, trustees, vendors) against applicable exclusion lists

(e.g., the Office of Inspector General’s Cumulative Sanction Report, the General Services Administration’s List of Parties Excluded from Federal Procurement and Non- Procurement Programs and the SDN List). The Human Resources Department conducts background checks, for applicants and all new employees, including employment history, education and references, and flags any issues to the OCC.

In addition, Maimonides conducts an extensive background check on healthcare providers applying for medical staff privileges and/or employment, including review of the National Practitioner Data Bank and the Federation of State Medical Boards. Maimonides will remove any healthcare provider under investigation from direct responsibility for or involvement in any healthcare benefit program pending resolution of any criminal charges or proposed debarment or exclusion. If the investigation results in conviction, debarment or exclusion, Maimonides will dismiss the provider or end any contractual arrangements with providers retained as independent contractors.

The Office of Corporate Compliance conducts exclusion checks on a monthly basis.

- **Vendor Checks**

The Purchasing and Accounts Payable Departments conduct an initial check of any vendor Maimonides does business with against the General Services Administration’s List of Parties Excluded from Federal Procurement and Non-Procurement Programs and SDN List. We will not knowingly contract with or engage a vendor convicted of a criminal offense related to health care (unless the vendor has implemented a compliance program as part of an agreement with the federal government) or excluded from or otherwise ineligible to participate in government-funded healthcare programs. Following this initial check, the OCC conducts a monthly check on all active vendors.

- **Review of Contracts**

The Office of Legal Affairs drafts and reviews contracts with vendors and other third parties (including physicians and physician-owned entities) to help ensure that the arrangements comply with applicable laws, rules, and regulations.

- **Exit Interviews**

The Human Resources Department provides an exit interview prior to the departure of every employee to determine whether the employee ever encountered or witnessed a Code violation. The Human Resources Department also engages in more in-depth and focused questioning of departing employees whose work involved areas deemed high-risk compliance areas. We fully investigate any reports of violations made by departing employees.



## COMPLIANCE CONTACT NUMBERS

**Sandra Maliszewski**

Vice President, Chief Compliance & Privacy Officer

718-283-6608

**Robert Dalrymple**

Chief Information Security Officer

718-283-1805

**Compliance Hotline**

800-585-7970 (may be used for anonymous reports)



**Office of Legal Affairs**

718-283-7452