

#### CORPORATE COMPLIANCE PROGRAM

VillageCare is a community-based, not-forprofit organization serving people with chronic care needs, as well as seniors and individuals in need of continuing care and rehabilitation services.

Our mission is to promote healing, better health and well-being to the fullest extent possible. Our care is offered through a comprehensive array of community and residential programs, as well as managed care.

VillageCare's Board of Directors formalized the Corporate Compliance Program to demonstrate commitment to conducting business with integrity in compliance with all applicable rules and the state and federal laws and regulations that apply to the health care industry.

To reinforce commitment to our core values, VillageCare has implemented a Corporate Compliance Program to provide guidance for furnishing quality health care services to the community we serve in an ethical and lawful manner.

### WHO IS THE CHIEF COMPLIANCE OFFICER?



DARA QUINN-BERMACK is VillageCare's Corporate Compliance Officer and HIPAA Privacy Officer. She can be reached at 212-337-5760 or daraq@villagecare.org.

### WHAT ARE THE ELEMENTS OF THE CORPORATE COMPLIANCE PROGRAM?

The Corporate Compliance Program contains eight (8) key elements. These are:

- 1. Written Compliance Policies and Procedures, including the Code of Conduct.
- 2. Designation of a Compliance Officer and Compliance Committee.
- 3. Training and Education.
- 4. Lines of Communication for Reporting Violations and Deficiencies.
- 5. Response to Detected Deficiencies.
- 6. Enforcement of Disciplinary Standards.
- 7. Auditing and Monitoring.
- 8. Enforcement of Non-Retaliation / Non-Intimidation Policy.

#### Our Compliance program also:

- Applies to MLTC and Medicare Part C and Part D Plans (Medicare Health Advantage and Medicare Total Advantage).
- Is reviewed and approved by CMS and SDOH.

Quality care and ethical behavior are fundamental to the culture and practice at VillageCare. We are committed to acting with integrity in all activities and to treating our employees, patients, residents, medical providers, volunteers and constituents in the community with respect.

VillageCare's Code of Conduct serves as a guide in matters concerning corporate compliance and ethical conduct.

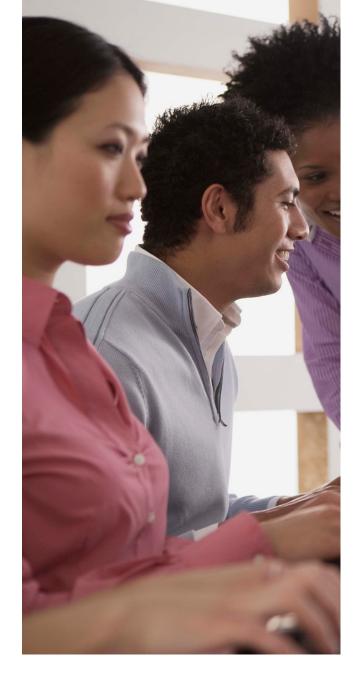
#### WHAT IS THE CODE OF CONDUCT?

The Code of Conduct is a guideline that sets forth VillageCare's commitment to good practices and ethical behavior. The Code of Conduct applies to everyone at all levels of the organization. The Code of Conduct is distributed at orientation and is reviewed as part of annual mandatory training.

# WHO HAS ULTIMATE RESPONSIBILITY FOR THE CORPORATE COMPLIANCE PROGRAM?

VillageCare's Board of Directors has ultimate responsibility for the Corporate Compliance Program and directs its Audit Committee to oversee all activities contained in the Corporate Compliance Program. Compliance Officer is appointed by the Board of Directors to administer the day-to-day activities of the Corporate Compliance Program. Α Corporate Compliance Committee is convened at the direction of the Compliance Officer to assist in carrying out these efforts. The Compliance Committee is comprised of key management, including the President and Chief Executive Officer and Presidents who Vice oversee service operations, plus designees from areas including human resources, finance and information technology.

In fulfilling the duties of the Compliance Office, the Compliance Officer ensures that compliance inquiries and investigations are appropriately managed to ensure adequate training and internal monitoring occurs, and make appropriate reporting to the Compliance Committee. the President and Chief Executive Officer and the Board Audit Committee concerning the Corporate Compliance Program.

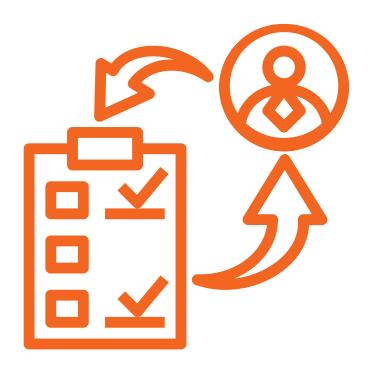


# WHERE CAN I ACCESS COMPLIANCE POLICIES & PROCEDURES AND THE CODE OF CONDUCT?

All VillageCare Compliance policies and Code of Conduct are maintained by the Compliance Office and accessible on the Intranet and VillageCare's websites at: www.villagecare.org/compliance and www.villagecaremax.org respectively.

#### DO WE HAVE COMPLIANCE TRAINING?

Yes, everyone is required to complete compliance training during orientation and as part of annual mandatory training.



### HOW ARE COMPLIANCE ACTIVITIES MONITORED?

On-going monitoring and audits are performed by the Compliance Office and also initiated by the Internal Audit division and include the following areas:

- Billing, Reimbursement and Patient Accounts
- · Quality of Care
- Environment and Safety
- Information Privacy and Security
- Corporate/Legal Processes
- Exclusions, Sanctions, Provider Credentialing
- Managed Care Plans including Medicare Part C and Part D plans, Medicaid MLTC and Medicare Advantage Prescription Drug Plans
- Conflicts of Interest (actual or perceived)
- Other areas as necessary and includes reviews of purchasing practices, contracts, business associate agreements and human resource or employment related processes.

There are also other Inter-disciplinary Committees and teams established that conduct related monitoring activities, implement corrective actions, and review regular reports. These are known as:

- Corporate Compliance Committee
- Quality Resource Council
- Professional Advisory Committee
- Quality Improvement Committee
- Security Incident Response Team

### HOW IS OUR CORPORATE COMPLIANCE PROGRAM EVALUATED?

The Compliance Officer reports at least quarterly to the Compliance Committee, the President and Chief Executive Officer and the Board Audit Committee with respect to compliance issues, conducts an annual risk assessment and makes any necessary recommendations. External review of the Corporate Compliance Program is also conducted.

#### HOW DO I MAKE AN INQUIRY OR REPORT A VIOLATION, INCLUDING HIPAA PRIVACY AND SECURITY ISSUES OR AN ACT OF FRAUD, WASTE AND ABUSE?

- Representatives may report violations to any member of the management staff or the immediate chain of command.
- Inquiries may also be submitted anonymously using the compliance hotline at this number:

### WHAT HAPPENS AFTER A REPORT IS MADE?

- When the Compliance Officer determines an investigation is warranted, the investigation is conducted promptly and thoroughly with the assistance, when needed, of legal counsel and/or other appropriate persons in a confidential manner.
- The Compliance Officer, upon conclusion of an investigation, submits any necessary reports and ensures that appropriate remediation and corrective action is undertaken.
- Representatives shall not suffer retaliation for making a report in good faith.

COMPLIANCE HOTLINE: (844)-348-2664
Or visit:

www.villagecare.ethicspoint.com

## Reporting Compliance Concerns

