



Montefiore

HUDSON VALLEY
COLLABORATIVE

COMPLIANCE PLAN

December 2015



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COMPLIANCE PLAN

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MONTEFIORE HUDSON VALLEY

COLLABORATIVE

COMPLIANCE PLAN

Introduction

Federal, state and local governmental agencies have identified a number of instances of fraud, abuse and waste in federal and state funded health care programs. The Steering Committee of the Montefiore Hudson Valley Collaborative (“MHVC”), as well as MHVC management and Montefiore Medical Center (Montefiore), the lead entity of the MHVC, recognize the seriousness of the issues raised by the Government and recognize that failure to comply with applicable laws and regulations could threaten Montefiore’s, MHVC’s, and our participating provider partners’ (“Partners”) participation in these health care programs and in the New York State Delivery System Reform Incentive Payment (“DSRIP”) program. Further, New York State has mandated that compliance programs are a necessary part of DSRIP participation.

The Steering Committee, therefore, has directed that MHVC undertake a compliance program (“the Program”) in order to continue MHVC’s and our Partners’ commitment to high standards of conduct, honesty and reliability. The purpose of the Program is to promote understanding of and adherence to applicable federal and state laws, regulations, and guidance and to make a sincere effort to prevent, detect and correct any fraud, abuse or waste in connection with the DSRIP program.

The Program applies to MHVC and its Partners, though neither MHVC nor Montefiore is responsible for Partners’ individual compliance programs or use of DSRIP funds. MHVC staff members are Montefiore associates and are thus also responsible for upholding the existing Montefiore Compliance Program. (“Associates” mean any and all members of the Montefiore workforce including officers, managers and staff as well as any other person or individual hired on a full or part-time basis by and in the paid service of Montefiore. This includes MHVC staff members.) Inasmuch as Montefiore is the MHVC lead entity, the Program is a delegate of the larger Montefiore Compliance Program, and the Program will

coordinate closely with and utilize resources of the Montefiore Compliance Program.

There are several parts to the Program, each of which is important. The essential policies, procedures and initiatives that define an effective, robust Program are included in this document and constitute the MHVC Compliance Plan. MHVC and its staff members are also bound by the Montefiore Code of Conduct and by existing Montefiore compliance policies and procedures, which will be updated as needed to describe compliance expectations related to DSRIP funds. Likewise, Montefiore's existing Corporate Compliance Plan will be modified to reflect the specific obligations placed on Montefiore as the MHVC lead entity as the DSRIP program evolves.

I.
STANDARDS OF CONDUCT

MHVC is committed to upholding Montefiore's promulgated standards of conduct, which require that all individuals associated with Montefiore conduct Montefiore's business in accordance with federal, state and local laws, professional standards, applicable federal and state funded health care program regulations and policies and with honesty, fairness and integrity. Associates, including MHVC staff members, should perform their duties in good faith, in a manner that they reasonably believe to be in the best interests of MHVC and Montefiore patients with the same care that a reasonably prudent person in the same position would use under similar circumstances. We hold the same position in regard to all MHVC-related activities of our Partners.

A. **Montefiore Code of Conduct.** The Montefiore Code of Conduct, published in June 1998, along with periodic updates, establishes a common code of conduct that applies to all trustees, physicians and other health care providers, officers, full- and part-time associates, vendors, students and volunteers. This Code of Conduct is the basis for MHVC's and Partners' conduct relating to DSRIP activities as well. It will be provided to all Partners and is available on the Montefiore Web site.

B. **Claim Submission Guidelines:** It is Montefiore's intention that all billing claims submitted for payment to Medicaid and all other payers are accurate, represent the services actually provided, and describe the conditions under which the patient received the services. Consistent with this policy, the following billing and coding principles should be followed, as applicable, by MHVC and its Partners for MHVC-related activities.

1. Charges will only be billed for services or supplies that were actually provided to the patient and properly documented per applicable requirements in the medical record or other supporting documentation.
2. Charges will only be billed that accurately represent the level of service provided to the patient.

3. The diagnosis(es), procedure(s) and Diagnosis Related Group (DRG)(s) listed on the billing claim form will accurately reflect the patient's condition and will be supported by documentation in the medical record or billing files.
4. Payment for services will be pursued for only those services that are medically necessary and are properly documented in the medical record or other supporting documentation.
5. Each billing claim will be accurate and will follow the regulations established by Medicaid and, as applicable, other payors.
6. Under no circumstances will the selection of charges or codes be influenced by the possibility of improperly increasing the level of payment that may be received.

C. **DSRIP Payments Guidelines.** MHVC will distribute payments to its Partners based on the funds flow model developed by the MHVC Finance and Sustainability Subcommittee and approved by the Steering Committee. This model is based on satisfaction of specific DSRIP-related metrics, which will be monitored by MHVC. MHVC will dedicate resources and take reasonable steps to ensure that the Medicaid funds distributed as part of the DSRIP program are not connected with fraud, waste or abuse and are not based on false information regarding DSRIP performance.

1. In the event that overpayments to MHVC or its Partners are identified to or by MHVC, MHVC will take prompt corrective action within its control to refund or otherwise correct the overpayment pursuant to DSRIP or OMIG guidelines or other applicable procedures. Such action may include necessary recoupment from Partners, as required by State or Federal authorities.
2. In the event an overpayment is identified at a Partner, MHVC will inform the Partner and, on a case-by-case basis, either facilitate necessary corrective actions to be taken by the Partner, or advise the Partner of the need to take such actions independently. In the latter case, Partners are required to report on their corrective steps promptly to MHVC. Failure to report and/or take corrective action in a timely and/or or comprehensive fashion may result in sanctions

which may include but are not limited to the termination of the Partner's relationship with MHVC and disclosure to applicable government agencies. Neither Montefiore nor MHVC will be responsible for the actions of the Partner.

3. Partners are responsible for notifying MHVC immediately upon identification of a MHVC-related overpayment and to cooperate fully with MHVC in investigating and correcting the overpayment.

D. Other Standards of Conduct. Other policies and standards of conduct have been adopted by Montefiore and MHVC to further accomplish the goals of the organization and to promote acceptable practices important to an effective compliance program. These policies and standards of conduct are promulgated from time to time through notices to Associates and/or Partners, incorporation in institutional and departmental manuals, and through posting on the Montefiore intranet. MHVC is bound by and supports Montefiore's policies and standards where applicable.

These standards are not intended to cover every situation that may be encountered, and associates and Partners should comply with all applicable laws, regulations, and guidance whether or not specifically addressed in the standards.

Questions about the existence, interpretation or application of any law, regulation, policy, guidance, or standard should be directed, without hesitation, to an Associate's supervisor, the MHVC Compliance Officer, the Montefiore Department of Compliance, or the Montefiore/ MHVC Compliance Hotline. Inasmuch as the DSRIP program, as well as its governing laws, regulations and policies, is constantly evolving, this Compliance Plan will be revised and updated as needed. Revisions will be communicated in a timely manner to MHVC staff members and Partners, and material changes impacting the Montefiore Compliance Program will be posted to the Montefiore Compliance intranet page, as appropriate.

Failure to comply with the standards of conduct or to conduct business in an honest, ethical, and reliable manner can result in civil fines or criminal penalties against MHVC, its Partners, or Montefiore and its Associates, as well as disciplinary action by

Montefiore, including termination or removal from MHVC. All Partners will have access to compliance education and Program resources, and they will be required to complete an annual Compliance certification, including a statement attesting to the provision of compliance education. Compliance standards will be included in MHVC contracting and payment metrics.

II. OVERSIGHT AND MANAGEMENT OF THE PROGRAM

A. **Legal and Compliance Subcommittee of the Steering Committee** The MHVC Legal and Compliance Subcommittee of the Steering Committee (“Subcommittee”) is established, in part, for the purpose of assisting the Steering Committee in the oversight of MHVC’s compliance and business ethics. The requirements and responsibilities of the Subcommittee are set forth in the Subcommittee Charter.

B. **MHVC Compliance Officer.** MHVC and Montefiore have appointed a MHVC Compliance Officer as the executive in charge of the continued development, implementation and operation of the Program. The MHVC Compliance Officer works closely with the MHVC Executive Director and Montefiore Compliance Officer, reporting directly to Montefiore senior leadership.

1. **Duties.** The MHVC Compliance Officer’s primary responsibilities may include:

- Overseeing and monitoring the implementation of the MHVC Compliance Program;
- Reporting on a regular basis to the Steering Committee, Subcommittee, MHVC Executive Director and Montefiore Compliance Officer on the progress of such implementation; and assisting the Steering Committee, Subcommittee, MHVC Executive Director, and Montefiore Compliance Officer in establishing methods to reduce MHVC’s vulnerability to fraud, abuse and waste;
- Preparing an annual written report on MHVC compliance activities for the Montefiore Board of Trustees, and providing any necessary information to the Montefiore Compliance Officer for additional DSRIP-related reports;
- Participating in the Montefiore Executive Compliance Committee;
- Periodically revising the Compliance Program as required by changes in the DSRIP program and related laws, policies and procedures;
- Developing and participating in an educational and training program that

focuses on the elements of the Compliance Program, and seeks to ensure that affected Associates and Partners are knowledgeable of, and comply with, pertinent federal and state standards;

- Incorporating Montefiore's mission into the MHVC Compliance Program and in all compliance-related interactions with Associates, Partners, vendors, and community members;
- Coordinating with the Montefiore Department of Compliance to implement internal compliance review and monitoring activities, including annual or periodic reviews and audits;
- Coordinating with MHVC management and the Montefiore Department of Compliance to monitor or audit Partners' performance towards meeting DSRIP milestones and other required actions for compliance purposes;
- In coordination with the Montefiore Compliance Officer, interfacing with internal and external legal counsel and representatives of government agencies on compliance-related matters as needed;
- Coordinating with the Montefiore Department of Compliance regarding any investigations of MHVC compliance matters, and
- Educating Partners on policies and programs that encourage associates to report suspected fraud and other improprieties without fear of retaliation.

2. **Authority.** The MHVC Compliance Officer shall have direct access to all members of the Steering Committee and Subcommittees. The MHVC Compliance Officer shall have access to all documents and information relevant to compliance activities including but not limited to patient records, billing records, marketing records and contracts and written arrangements or agreements with others. The MHVC Compliance Officer, in consultation with the Montefiore Compliance Officer, shall have the ability to directly retain and oversee the activities of outside legal counsel, consultants and other experts as needed for compliance-related matters.

3. **Reports.** The MHVC Compliance Officer shall report to the Steering Committee periodically, on the status of compliance at MHVC. Such reports

may be written or oral. In addition, the MHVC Compliance Officer shall provide all necessary information to the Montefiore Compliance Officer to ensure appropriate reports can be made to the Montefiore Board of Trustees.

C. Collaboration with the Montefiore Department of Compliance. The MHVC Compliance Officer will work closely with the Montefiore Compliance Officer and Department of Compliance. The Montefiore Compliance Officer has designated the following professionals, who serve as the focal point for compliance activities, as follows:

1. Associate Vice President, Compliance
2. Senior Director, Billing Compliance
3. Associate Vice President & Counsel, Corporate Compliance, Information Privacy Officer and Research Compliance Officer
4. Director, Corporate Compliance
5. Information Security Officer

The Montefiore Department of Compliance will periodically execute compliance projects relating to the MHVC, under the direction of the Montefiore and MHVC Compliance Officers. The Montefiore Compliance Officer will provide the Montefiore Executive Compliance Committee with quarterly reports on MHVC compliance activities.

III. RESPONSIBILITIES

A. Responsibilities of Supervisors. Each MHVC supervisor is responsible for: 1) promoting compliance standards, policies, and procedures within their departments; 2) ensuring that all MHVC staff members within their departments complete Montefiore and any additional MHVC Compliance training; 3) enforcing this Compliance Plan, the Code of Conduct, applicable Montefiore policies and procedures, and applicable laws, regulations, and guidance; 4) reporting to the MHVC Compliance Officer any reports or reasonable indication of violations of applicable law or regulation; 5) in coordination with the MHVC Compliance Officer, initiating and/or implementing corrective or disciplinary action in the event of violation of the Compliance Plan, the Code of Conduct, Montefiore policies, procedures and applicable laws and regulations; and 6) taking all measures reasonably necessary to ensure compliance with the Program and any applicable laws, regulations, and guidance.

B. Responsibilities of Partners. Partners will be responsible for upholding the principles of the Montefiore Code of Conduct and actively participating in and supporting the MHVC Compliance Program. In addition, Partners are expected to maintain their own effective compliance programs as required by State and Federal requirements. Partners will comply with all applicable laws, regulations, and guidance applicable to their conduct in the DSRIP program, and will comply with the terms of their DSRIP and MHVC agreements. Partners will encourage good faith participation in the MHVC Compliance Program and their own compliance programs, when applicable, and will not intimidate or retaliate against employees or other associates for such participation. Other partner compliance responsibilities will include, but are not limited to:

1. Review of compliance materials provided by MHVC, including the Montefiore Code of Conduct, this Compliance Plan, and policies related to the Deficit Reduction Act (DRA) and fraud, waste, and abuse control,
2. Annual attestation to MHVC that, to the extent required, the partner operates in a manner consistent with those policies. This will include confirmation

that the partner has provided compliance education and training related to DSRIP to its affected employees, executives, and governing body members. MHVC will provide its Partners with compliance and education training materials as needed.

3. If Partners are subject to the mandatory compliance program obligations set forth in New York State Social Services Law Sec. 363-d, they will provide MHVC with copies of required annual New York State compliance certifications upon request.
4. Additional steps required by State or Federal law, regulation, or guidance.

C. Compliance Policies and Procedures. MHVC Compliance materials will be placed on the MHVC Web site. All Montefiore policies and procedures may be found on the Montefiore Intranet. Questions regarding interpretation of compliance policies and procedures should be directed to the Montefiore Department of Compliance.

IV.
TRAINING AND EDUCATION

- A. **Necessity.** Rules and regulations relating to delivery of healthcare and the DSRIP program are complex. Education is required in order to provide all associates and trustees with the knowledge and skills to carry out their responsibilities in compliance with all requirements. Proper and continuing training and education is, therefore, a significant element of an effective compliance program.
- B. **MHVC: Initial Education.** Montefiore’s mandatory orientation for new Associates, including MHVC staff, will provide an overview of fraud, waste and abuse laws; a summary of the standards of conduct; an explanation of the elements of the Montefiore Compliance Program, including the complaint and reporting process; a summary of HIPAA privacy and security requirements; and will highlight Montefiore’s commitment to integrity in its business operations and the relationship of compliance to Montefiore’s mission. Compliance training and education is also periodically provided to vendors. In addition, MHVC staff will be provided with DSRIP-specific compliance training, and DSRIP-related compliance education materials will be made available to Partners.
- C. **MHVC: Continuing Education.** Periodically, as necessary, appropriate MHVC staff members will be retrained in (1) Montefiore’s Compliance Program guidelines; (2) the fraud, waste and abuse laws; (3) HIPAA privacy and security and their implementation; and (4) the consequences both to Montefiore and to individuals of failing to comply with applicable laws and regulations. Such training must emphasize the importance of the Compliance Program and Montefiore’s commitment to honesty, integrity and ethical behavior in its business dealings. MHVC staff members will also receive periodic updates on the Program DSRIP-specific compliance issues as necessary.
- D. **Documentation.** The Montefiore training provided to each Montefiore associate shall be documented. The documentation shall include the date and a brief description of the subject matter of the training activity or program. Documentation is important and

will be retained on file for a minimum of ten years. In addition, MHVC will retain documentation of any DSRIP-specific compliance training provided to MHVC staff, the Steering Committee and Subcommittee, and Partners for the duration of the New York State DSRIP project.

- E. **Failure to Attend.** Failure of MHVC staff members to comply with training requirements or to attend scheduled training sessions of Montefiore or MHVC may result in disciplinary action.

- F. **Partners.** Partners are required to meet their individual compliance responsibilities as applicable, including providing training and education to all affected employees, persons associated with the provider, executives, and governing body members on compliance issues. Training and education materials should include compliance expectations related to the DSRIP program, Partners' roles in DSRIP projects, and how to report any fraud, waste, or abuse of DSRIP funds. MHVC shall provide Partners with training and educational materials, though Partners will have the opportunity to use their own compliance resources if appropriate. Partners are required to confirm to MHVC that training and education have been provided annually.

G. Steering Committee. MHVC shall provide initial education and training to Steering Committee members on DSRIP-related compliance issues, expectations and compliance program operations. Training and education will be reinforced annually. Steering Committee members shall also be provided with periodic updates on compliance-related issues and the compliance program as necessary.

H. Montefiore Trustees. Montefiore shall provide education to its trustees on compliance issues, expectations and compliance program operations, including those relevant for DSRIP. Trustees shall be provided with periodic updates on compliance-related issues and the compliance program, inclusive of MHVC compliance activities.

V.

COMMUNICATION

- A. **Reason.** Open communication between MHVC staff and Partners and the MHVC Compliance Officer, as well as between the MHVC Compliance Officer and the Montefiore Department of Compliance is important to the success of the Program and to the reduction of any potential for fraud, waste and abuse. Without help from MHVC staff and Partners, it may be difficult to learn of possible compliance issues and make necessary corrections and without help from the MHVC Compliance Officer and Montefiore Department of Compliance, staff and Partners would not be made aware of new laws and regulations.
- B. **Questions.** At any time, any MHVC staff member, Steering Committee member, Partner or vendor may seek clarification or advice from the MHVC Compliance Officer or Montefiore Department of Compliance with regard to this Program or any MHVC or Montefiore policy or procedure related to this Program. If appropriate, questions and responses may be shared with MHVC staff or Partners for informational and educational purposes.
- C. **Reporting.** MHVC Steering Committee members, staff, or Partners who are aware of or suspect acts of fraud, waste or abuse or violations of the code of conduct are required to report such suspected acts or violations. Several independent reporting paths are available:
1. MHVC staff members may, but are not required to, report to their supervisor or manager. Supervisors and managers will refer the report to the MHVC Compliance Officer as soon as the report is made.
 2. Any individual may report directly to the MHVC Compliance Officer or Montefiore Department of Compliance.
 3. Through Montefiore, MHVC has contracted with an independent company to operate a “Compliance Hotline” which is available online (www.montefiore.alertline.com) or by telephone (1-800-662-8595). MHVC staff and Partners may use this Hotline for any necessary DSRIP-related

reports. The Compliance Hotline is available 24-hours a day, 365 days a year and is designed to gather the most complete information possible about each issue. Individuals may use this line anonymously at any time, day or night. The phone number of the Hotline and instructions on its use are printed on cards designed to be worn behind the official Montefiore associate identification badge, which are distributed to all Montefiore associates, including MHVC staff. Information concerning the Hotline also is available on the compliance page of the Montefiore intranet site and will be placed on the MHVC Web site. MHVC will also distribute information about the Compliance Hotline to Subcommittee and Steering Committee members and Partners.

4. Montefiore and MHVC vendors are provided with information on accessing the Hotline during training sessions offered by the Purchasing Department. Information on the Montefiore Compliance Program and the Hotline also is available in the vendors' section of the Montefiore internet site.

D. **Confidentiality.** Reports received will be treated confidentially to the extent possible under applicable law. There may be a time, however, when an individual's identity may become known or have to be revealed (e.g., if governmental authorities become involved, in response to subpoena or other legal proceeding, or if in the process of the investigation the identity of the reporter cannot be kept anonymous).

E. **Non-Retaliation.** There will be no intimidation or retaliation for good faith participation in the compliance program, including but not limited to reporting potential issues, investigating issues, self-evaluations, audits and remedial actions, and reporting to the government or accreditation agencies. An Associate, including any MHVC staff member, who makes an intentional false report or a report not in good faith may be subject to disciplinary action. All Partners shall adopt this policy of non-retaliation in relation to any DSRIP activities and are advised to incorporate such policy into their own compliance programs.

F. **Documentation.** The Montefiore Department of Compliance will maintain a

record of reports of violations of the Compliance Program of the standards of conduct, or of relevant law or regulations, received by the MHVC Compliance Officer or Montefiore Department of Compliance. The MHVC Compliance Officer will periodically furnish a summary of such reports to the Steering Committee, and the Montefiore Compliance Officer will periodically furnish a summary of such reports to the Montefiore Executive Compliance Committee and the Compliance Committee of the Board of Trustees.

VI.
INVESTIGATIONS

- A. **Requirements for Supervisors.** Each MHVC supervisor is responsible for making sure that any report or reasonable indication of violations of this Plan, the Code of Conduct, relevant Montefiore and MHVC policies or procedures or violations of applicable law, regulation, or guidance by those within his or her supervision is investigated timely. Any report or reasonable indication of a violation of laws or regulations must be reported to the MHVC Compliance Officer or Montefiore Department of Compliance or other appropriate Montefiore departments (e.g., Human Resources, Regulatory Affairs, Legal Affairs, Risk Management, etc.) immediately and prior to initiation of any investigation. MHVC staff should not initiate investigations without notifying the appropriate department as described above and being directed to do so.
- B. **Montefiore Department of Compliance Investigation.** In any case where there is a report or reasonable indication of a violation of applicable laws or regulations that fall within the scope of the MHVC Compliance Officer or the Montefiore Department of Compliance, the Montefiore Department of Compliance shall have the primary responsibility for conducting or overseeing the investigation of the alleged situation or problem. The Montefiore Compliance Officer may utilize the MHVC Compliance Officer and other Montefiore associates, including MHVC staff (consistent with appropriate confidentiality), outside attorneys, accountants and auditors or other consultants or experts for assistance or advice. The purpose of the investigation is to determine whether or not there is reasonable cause to believe an individual(s) may have knowingly or inadvertently participated in violations of applicable laws or regulations; to facilitate corrective action; and to implement procedures necessary to ensure future compliance.

C. Process. In the event of an investigation, the Montefiore Compliance Officer or his or her designee, including the MHVC Compliance Officer, may conduct interviews with any Montefiore associate, including MHVC staff, and, as necessary, with Partners or other DSRIP-related persons. The Montefiore Compliance Officer may review any MHVC document including, but not limited to, those related to the claim development and submission process, patient records, e-mail and the contents of computers, word processors, and mobile devices, and may undertake other processes and methods as the Montefiore Compliance Officer deems necessary.

D. Documentation. DSRIP-related compliance complaints and investigations will be entered into the Montefiore Global Compliance web portal for reporting and tracking purposes by the Montefiore Department of Compliance. Updates to the investigation may be entered into the database as well. Schedules, spreadsheets, and other paper-based documentation may be kept in individual case files that are retained for 11 years. The ultimate resolution of the matter will be noted in Global Compliance.

E. Attorney-Client Privileged Investigations. From time to time, certain compliance-related complaints may be investigated under attorney-client privilege. Attorney-client privileged files shall not be maintained in the Global Compliance web portal and/or in Department of Compliance Hotline-related paper files.

F. Corrective Action

1. Possible Criminal Activity.

a. In the event the investigation reveals or uncovers potential criminal activity on the part of any Montefiore Associate, including MHVC staff members, the situation will be managed pursuant to existing Montefiore compliance procedures and the following action will be taken:

- All potentially inappropriate billing involved in the situation or problem under the control of Montefiore or MHVC will be

discontinued until such time as appropriate corrections are made.

- A summary of the results of the investigation shall be reviewed by the Montefiore Compliance Officer and senior management, prior to being sent for appropriate disciplinary action to the MHVC Executive Director or any relevant department director or administrator. Pending disciplinary action, any involved Associate, including MHVC staff, may be removed from any position with oversight of or impact upon the claims development and submission process.
- Appropriate State and federal agencies will be notified and other corrective action taken as deemed appropriate by legal counsel.

b. If the suspected criminal activity is found at a Partner, MHVC will advise the partner's leadership to the extent legally permitted unless leadership is implicated in the suspected activity. The Partner shall take prompt corrective action and shall report on such action to the Montefiore Compliance Officer. Failure to report and/or take corrective action in a timely and/or comprehensive fashion may result in sanctions which may include but are not limited to the termination of the Partner's relationship with MHVC and disclosure to applicable government agencies. Neither Montefiore nor MHVC will be responsible for the actions of the Partner.

2. Other Non-Compliance.

a. In the event the investigation reveals problems related to the DSRIP program, which does not appear to be the result of criminal activity on the part of any Montefiore associate, including MHVC staff members, the situation will be managed pursuant to existing Montefiore compliance process and the following action will be taken:

- If duplicate payments have been made by Medicaid or other health care program or excessive payments made because of errors or mistakes (i) the defective practice or procedure will be corrected as quickly as possible; (ii) the duplicate or improper payments will be

calculated and recouped or repaid, if appropriate, to the State per the OMIG Self-Disclosure Protocol or other applicable processes; and (iii) a program of education and/or correction of systems issues will be undertaken to prevent future similar problems.

- If no duplicate or excessive payments have been made because of errors or mistakes (i) the defective practice or procedure will be corrected as quickly as possible; (ii) a program of education and/or correction of systems issues will be undertaken to prevent future similar problems.
 - A summary of the results of the investigation shall be sent for appropriate disciplinary action, if any, to the MHVC Executive Director.
- b. If the potential errors or mistakes are found at Partners in relation to MHVC activities, the Montefiore Compliance Officer will advise the partner's senior leadership to the extent legally permitted. The Partner shall take prompt corrective action and shall report on such action to the Montefiore Compliance Officer. Failure to report and/or take corrective action in a timely and/or or comprehensive fashion may result in sanctions which may include but are not limited to the termination of the Partner's relationship with MHVC and disclosure to applicable government agencies. Neither Montefiore nor MHVC shall be responsible for the actions of the Partner.

H. Reports by Compliance Officers. The Montefiore Compliance Officer periodically shall furnish information about such investigations to the Montefiore Executive Compliance Committee at its regular meetings and periodically to the Compliance Committee of the Board of Trustees. The MHVC Compliance Officer periodically may furnish information about such investigations, to the extent legally permissible, to the MHVC Steering Committee.

VII.
AUDITING & MONITORING

- A. **Process.** Periodic reviews will be undertaken in order to identify deficiencies relating to the receipt, use, and payment of funds for the DSRIP program by Montefiore and MHVC. On a yearly basis, the Montefiore Department of Compliance will develop a comprehensive work plan that will set forth the schedule of reviews, including those of MHVC activities, for the following year. In addition, the MHVC Compliance Officer, in consultation with the Montefiore Compliance Officer and Subcommittee, will establish an MHVC-specific work plan.
- B. **Periodic Tests and Reviews.** Montefiore or MHVC, under the direction of the Montefiore or MHVC Compliance Officers, will conduct periodic tests of funds flow to MHVC Partners in relation to the DSRIP program, and audits of information submitted by MHVC to the State for DSRIP payments. Other such tests and reviews will be performed as determined to be necessary.
- C. **Action.** The Montefiore Compliance Officer will be notified of the results of all reviews performed by Associates, consultants or government auditors that identify potential compliance issues relating to MHVC activities. This includes all audits conducted by Montefiore Internal Audit through which potential compliance issues have been identified. The Montefiore Compliance Officer shall coordinate with the MHVC Executive Director and MHVC Compliance Officer to implement any necessary corrective action relating to the use of DSRIP funds. Such actions may include notification of DSRIP Partners and necessary corrective actions.
- D. **Documents.** All reviews shall be thoroughly documented. Such documents shall be maintained in the permanent files of the Montefiore Compliance Officer and adequately secured.

VIII. SCREENING

- A. **New Associates.** Montefiore Human Resources Recruitment and Staffing have selected Sterling Testing Systems, Inc., which conducts a multi-state background check before each Associate, including MHVC staff members, is hired. As a standard policy, all individuals to whom an offer of employment at Montefiore is made have a Social Security/Address Trace, Criminal Conviction History Search, and Sexual Offender's database search. For select positions, consumer credit reporting and/or motor vehicle record checks may be required. In addition, all new Montefiore associates, including MHVC staff, will be screened against the applicable federal and state exclusion and sanction lists. The purpose of the background investigation and sanction screening is to determine whether any such associate or applicant has been (i) recently convicted of a criminal offense related to health care or (ii) listed by a federal agency as debarred, excluded or otherwise ineligible for federal program participation. The Department of Compliance will ensure that all Associates, including MHVC staff members, are screened against applicable exclusion and sanction lists on an ongoing basis.
- B. **Partners.** Partners that have or will possess an individual Medicare or Medicaid provider number are subject to the same exclusion and sanction checks as described above. Exclusion checks will be performed before any DSRIP funds are distributed to Partners and on an ongoing basis. In addition, Partners will be required to perform regular exclusion screenings of their employees and contractors and to notify MHVC immediately upon confirmation of any exclusion.
- C. **Vendors and Contractors.** Montefiore will conduct initial sanction and exclusion screening on all new vendors and contractors to determine whether any such vendor or contractor has a criminal conviction related to health care or has been disbarred or excluded by a federal agency.
- D. **Prohibition.** Montefiore will not hire or retain an individual who has been

recently convicted of a crime related to health care or who is listed as excluded, debarred, or otherwise ineligible for participation in federal or state health care programs; this prohibition shall apply to any potential or current MHVC staff member. Neither Montefiore nor MHVC will contract with any person or entity which has been recently convicted of a crime related to health care or is listed as excluded, debarred or otherwise ineligible for participation in federal or state health care programs and will attempt to terminate its DSRIP contract arrangements with any such person or entity, subject to legal constraints such as damages for breach of contract. Montefiore will make reasonable and prudent effort not to submit any claim for service ordered or furnished by any person or entity, including physicians, excluded from participation in federal or state health care programs.

IX.
REPORTS

The Montefiore Compliance Officer shall make written evaluation reports on DSRIP-related compliance activities including reports or complaints received from associates, results of investigations, and auditing and monitoring activity, to the Compliance Committee of the Montefiore Board of Trustees and members of the Montefiore Executive Compliance Committee on a regular basis. Reports to the Board shall be at least annually or more often as necessary or advisable. The MHVC Compliance Officer shall make comparable reports to the Subcommittee.

X.

RESPONSE TO GOVERNMENTAL INQUIRIES

- A. **Cooperation.** Federal, state and local agencies have available a number of investigation tools including search warrants, subpoenas and civil investigation demands. Actions also may be brought against Montefiore to exclude it from participating in Medicare/Medicaid if Montefiore fails to grant immediate access to agencies conducting surveys or reviews. It is, therefore, the policy of Montefiore and MHVC to cooperate with and properly respond to all governmental inquiries and investigations. Partners shall support and adhere to this policy in relation to any MHVC-related actions.
- B. **Process.** Montefiore associates, including MHVC staff members, who receive a search warrant, subpoena or other demand or request for investigation, or if approached by a state or federal agency, should attempt to identify the investigator, and immediately notify Montefiore Risk Management, Legal Affairs or Department of Compliance in advance of giving any statement, affidavit or testimony.¹ Any Partner receiving a search warrant, subpoena or other demand or request for investigation in relation to MHVC activities should attempt to identify the investigator and immediately notify MHVC.
- C. **Documents.** Montefiore's response to any warrant, subpoena, investigation or inquiry, including those relating to MHVC, must be complete and accurate. No Montefiore associate, including MHVC staff, shall alter, destroy or mutilate any document or record or alter, delete or download any material from any computer, word processor, disk or tape, except in accordance with Montefiore's records retention policies. If a document is required to be retained, it must be preserved in its original form. Partners are expected to support and adhere to this policy in relation to any MHVC-related inquiries.

¹ This does not apply in situations where routine subpoenas are served to Health Information Management or the Child Advocacy Center, medical malpractice or general liability subpoenas, or those forwarded to the associate by Risk Management or the Office of Legal Affairs. Additionally, subpoenas for routine employee matters, such as garnishment of wages, should be forwarded directly to Human Resources.

XI.

DISCIPLINE AND DISCLAIMER

- A. **Other Reasons.** In addition to possible disciplinary action mentioned elsewhere in this Program, Associates, including MHVC staff, may be subject to disciplinary action for:
1. Failure to perform any obligation or duty required of Associates relating to compliance with this Program or applicable laws or regulations.
 2. Failure of supervisory or management personnel to detect non-compliance with applicable policies and legal requirements and this Program where reasonable diligence on the part of the manager or supervisor would have led to the discovery of any violations or problems.
- B. **Procedure.** Possible disciplinary action will follow Montefiore's existing disciplinary policies and procedures.
- C. **Disclaimer.** Nothing in this Program shall (i) constitute a contract of or agreement for employment; or (ii) modify or alter in any manner any associate's at-will employment status. Any part of this Program may be changed or amended at any time.

XII.
REVIEW PROCESS

- A. **Review.** The MHVC Compliance Plan and any subsequent revisions are subject to review by the Subcommittee, acting on behalf of the MHVC Steering Committee.