MEDICAID CORPORATE COMPLIANCE POLICY AND PROGRAM

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SINERGIA'S CORPORATE COMPLIANCE PROGRAM AND COMMITMENT STATEMENT

Sinergia prides itself on its reputation for honesty and integrity. We are proud of the high quality of the services we provide to our consumers and their families. As part of Sinergia's ongoing commitment to embody and promote the highest ethical standards, we have established a Corporate Compliance Program. This program furthers Sinergia's mission of providing the highest quality of services to person's served and their families. It promotes adherence to laws, regulations, and Sinergia's internal policies.

Sinergia's commitment to preventing fraud, waste, and abuse in our delivery of services is instituted by the adoption of this Corporate Compliance Program.

The laws that prohibit the submission of false claims impose an affirmative obligation on Sinergia and its employees, agent and contractors to know and to understand the rules and regulations regarding the submission of claims. Sinergia makes it a part of the duty of all employees to support its commitment to accurate billing by reporting any potential misconduct directly to their supervisor or to the Medicaid compliance officer. Violations can subject Sinergia to significant fines and penalties.

Federal law prohibits Sinergia from discriminating, retaliating or penalizing in any way persons that report concerns and our anonymous Reporting Form allows for confidential reporting. Any person who believes that Sinergia has not responded appropriately to his or her reports of potential problems is permitted, under federal statute to notify the federal government. As a matter of statute as well as its own internal policy, Sinergia is prohibited from taking any adverse action against persons who notify the federal government of potential violations.

Thank you for reviewing this Policy carefully. If you have any questions about this Policy please contact the Medicaid Corporate compliance officer.

PURPOSE

The purpose of this policy directive is to maintain the integrity of Medicaid programs by both preventing and detecting fraudulent, abusive, and wasteful practices and ensuring that Sinergia's Medicaid Corporate Compliance Program complies with federal and state *laws, rules, and regulations.*

APPLICABILITY

This policy applies to all "affected individuals" meaning all persons who are affected by Sinergia's risk areas including employees, the chief executive, other senior administrators, contractors, interns and the board of directors. Contractors are only subject to Sinergia's compliance program to the extent it is related to their contracted role and responsibilities within Sinergia's identified risk areas.

The compliance policy must be available and accessible to all affected individuals.

STANDARDS OF CONDUCT

Employees, contractors, volunteers and interns and Board of Directors (hereinafter referred to as "affected individuals") shall at all times conduct themselves in a way to meet the requirements of the Compliance Program, Policy and Procedures. Conduct contrary to this expectation will be considered a violation of the Compliance Program. The standards of conduct consists of and requires that all affected individuals:

- behave in ethical and legal ways;
- provide the highest quality care and services;
- comply with all rules and regulations;
- accurately bill for services that are necessary;
- document billing and program records accurately and truthfully;
- not alter, destroy or change any agency records;
- conduct proper and legal business transactions;
- seek training and assistance in areas that would strengthen my ability to fulfill responsibilities;
- avoid conflicts of interest, including the acceptance of and giving of gifts;
- conduct all activities in a fiscally responsible manner;
- maintain all information about the people we serve confidential and release information only when in conformance with appropriate procedures;
- report all concerns to a supervisor, senior executives or the Corporate compliance officer without fear of retribution and;
- support and promote a work environment where staff can raise ethical concerns.

1. THE COMPLIANCE OFFICER

Sinergia's shall designate an individual to serve as its compliance officer. The compliance officer is responsible for the day-to-day operation of the compliance program.

a. The compliance officer's primary responsibilities shall include:

- overseeing and monitoring the adoption, implementation and maintenance of the compliance program and evaluating its effectiveness;
- drafting, implementing, and updating no less frequently than annually or, as otherwise necessary, to conform to changes to Federal and State laws, rule, regulations, policies and standards, a compliance work plan which shall outline Sinergia's proposed strategy for meeting the requirements of this section for the coming year, with a specific emphasis on written policies and procedures, training and education, auditing and monitoring, and responding to compliance issues, as specified herein;
- reviewing and revising the Compliance Program to incorporate changes of federal and state laws, rules, regulations, policies and standards;

- reporting directly, on a regular basis, but no less frequently than quarterly, to Sinergia's board of directors, chief executive, and compliance committee on the progress of adopting, implementing, and maintaining the compliance program;
- assisting Sinergia in establishing methods to improve it's efficiency, quality of services, and reducing the required provider's vulnerability to fraud, waste and abuse; and
- investigating and independently acting on matters related to the compliance program, including designing and coordinating internal investigations and documenting, reporting, coordinating, and pursuing any resulting corrective action with all internal departments, contractors and the State.

b. The compliance officer shall report directly and be accountable to Sinergia's chief executive officer or another senior manager whom the chief executive may designate for reporting purposes provided, however, such designation does not hinder the compliance officer in carrying out their duties and having access to the chief executive and board of directors.

c. The responsibilities in paragraph (a) of this subdivision may be the compliance officer's sole duties or, the compliance officer may be assigned other duties, provided that such other duties do not hinder the compliance officer in carrying out their primary responsibilities.

d. Sinergia shall ensure that the compliance officer is allocated sufficient staff and resources to satisfactorily perform their responsibilities for the day-to-day operation of the compliance program based on the required provider's risk areas and organizational experience.

e. Sinergia shall ensure that the compliance officer and appropriate compliance personnel have access to all records, documents, information, facilities and affected individuals that are relevant to carrying out their compliance program responsibilities.

2. COMPLIANCE COMMITTEE

Sinergia shall designate a compliance committee which shall be responsible for coordinating with the compliance officer to ensure that Sinergia is conducting its business in an ethical and responsible manner, consistent with its compliance program. The Compliance Committee assists the board of directors with overseeing that Sinergia's activities are in compliance with laws and regulations.

Sinergia shall review this Medicaid Corporate Compliance Policy and Procedures at least annually to determine if such written policies, procedures, and standards of conduct have been implemented; are being followed by affected individuals, are effective, and whether any updates are required.

a. Membership

Membership in the committee shall, at a minimum, be comprised of senior managers.
The compliance committee shall meet no less frequently than quarterly.

The compliance committee shall report directly and be accountable to Sinergia's chief executive and board of directors.

b. Meeting and Procedures

The Committee shall maintain written minutes of its meetings and activities. Minutes of each meeting of the Committee shall be distributed to each member of the Committee

The Chair of the Committee shall report to the board following meetings of the Committee, and as otherwise requested by the President of the Board. Reports may be written or oral depending on the preference of the Board of Directors.

c. Responsibilities of the Committee

- coordinating with the compliance officer to ensure that the written policies and procedures, and the standards of conduct in the policy are current, accurate and complete
- ensure that the Corporate Compliance trainings are timely completed;
- coordinating with the compliance officer to ensure communication and cooperation by affected individuals on compliance related issues, internal or external audits, or any other function or activity required by the Compliance program;
- advocating for the allocation of sufficient funding, resources and staff for the compliance officer to fully perform their responsibilities;
- ensuring that Sinergia has effective systems and processes in place to identify compliance program risks, overpayments and other issues, and effective policies and procedures for correcting and reporting such issues; and
- advocating for adoption and implementation of required modifications to the compliance program.

3. TRAINING AND EDUCATION

Sinergia shall train and educate its compliance officer and affected individuals, including executives and members of the Board of Directors, on Sinergia's Corporate Compliance Policy; Such training shall occur at least annually, and shall be made a part of the orientation of new employees. The training shall be in a form and format accessible and understandable to all affected individuals.

Sinergia shall develop and maintain a training plan that shall outline the subjects or 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 the effectiveness of the training will be periodically evaluated.

Compliance training content/materials must include the following:

- Sinergia's risk areas;
- Sinergia's Compliance Program;
- the role of the compliance officer and the compliance committee;
- how affected individuals can ask questions and report potential compliance-related issues to the compliance officer and senior management, including the obligation of affected individuals to report suspected illegal or improper conduct and the procedures for submitting such reports; and the protection from intimidation and retaliation for good faith participation in the compliance program;
- disciplinary standards, with an emphasis on those standards related to the required provider's compliance program and prevention of fraud, waste and abuse;
- how Sinergia responds to compliance issues and implements corrective action plans;
- requirements specific to the categories of service (i.e. dsp, fiscal, managers);
- coding and billing requirements and best practices, if applicable; and
- claim development.

Distributing the compliance policy and procedures does not qualify as effective training and education. Self-reviewing the material by employees is acceptable for annual trainings only if there is evidence of affected individuals having received and appropriately applied the subject matter.

4. REPORTING COMPLIANCE ISSUES

Accessible methods of communication with the compliance officer are critical to the successful implementation and operation of the Compliance Program. The methods of communication shall be accessible to all affected individuals and service recipients and shall allow for questions regarding compliance and the reporting of compliance issues. Accordingly, the compliance officer shall provide an open door, confidentiality, and an assurance of non-retribution.

Sinergia shall publicize the methods of communication to the compliance officer in its trainings, posting the information in an employee billboard, and by making this policy readily accessible.

The following methods are available for reporting suspected Medicaid misconduct:

i. Inform your supervisor, who must report the misconduct to the compliance officer;
ii. Call the compliance officer directly at (212) 643-2840 ext. 306;
iii. Email the compliance officer at: Medicaid.compliance@sinergiany.org. This email address is only accessed by the compliance officer who has been assigned compliance responsibilities;
iv. Anonymous reports can be made by USPS by writing to:
Medicaid Corporate Compliance Officer
Sinergia Inc.
2082 Lexington Avenue, 4th Floor
New York, NY 10035

Sinergia shall ensure that 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, MFCU, OMIG or law enforcement, or disclosure is required during a legal proceeding, and such persons shall be protected under Sinergia's policy for non-intimidation and non-retaliation.

5. DISCIPLINARY POLICIES

Employees have a duty to report suspected or known Medicaid compliance issues. Any Sinergia employee who violates this policy, the standards of conduct, or state and federal laws, rules and regulations or fails to report either actual or suspected noncompliance with this Policy, will be subject to disciplinary action. This may include sanctions up to and including termination.

After an investigation, if the concern reported requires disciplinary action, the disciplinary process will proceed per policy as outlined in the Employee Handbook. It is important to note that depending on the severity of the non-compliant behavior, intentional or reckless behavior will be subject to more significant sanctions; progressive discipline not being applicable. Sinergia shall enforce its disciplinary standards fairly and consistently such that the same disciplinary action should apply to all levels of personnel. Sinergia's disciplinary policy will apply for

- failing to report suspected problems
- participating in non-compliant behavior
- encouraging or permitting active or passive non-compliant behavior.
- Retaliating against, harassing, or intimidating anyone for reporting a concern or violation
- Interfering or failing to cooperate with an internal or external investigation
- Failure of management personnel to detect non-compliance with their department's applicable policies, where reasonable due diligence on the part of the manager would have led to the discovery of such non-compliance
- Failure to perform any of the required compliance training and failure to complete any assigned compliance assignments.

6. AUDITING AND MONITORING

Sinergia shall establish and implement an effective system for the routine monitoring and identification of compliance risks. The system should include internal monitoring and audits and, as appropriate, external audits, to evaluate the organization's compliance and the overall effectiveness of the required provider's compliance program. In developing its auditing and monitoring program Sinergia shall meet the following requirements:

Auditing. Sinergia shall perform routine audits by internal or external auditors who have expertise in state and federal Medicaid compliance program requirements and applicable laws,

rules and regulations, or have expertise in the subject area of the audit. Audits or investigations conducted by state or federal governmental entities are not considered external audits for purposes of this policy. The audits required by this paragraph shall meet the following requirements:

i. Internal and external compliance audits shall focus on the risk areas:
   - billings
   - payments
   - ordered services
   - medical necessity
   - quality of care
   - governance
   - mandatory reporting
   - credentialing
   - contractor, subcontractor, agent or independent contract oversight
   - other risk areas that are or should reasonably be identified.

ii. The results of all internal or external audits, or audits conducted by the state or federal government shall be reviewed for risk areas that can be included in updates to the required provider's compliance program and compliance work plan.

iii. The design, implementation, and results of any internal or external audits shall be documented, and the results shared with the compliance committee and the board of directors.

iv. Any Medicaid overpayments identified shall be reported, returned and explained in accordance with the provisions of 18 NYCRR Part 521-3 and the required provider shall promptly take corrective action to prevent recurrence.

Annual compliance program review. The required provider shall develop and undertake a process for reviewing, at least annually, whether the requirements of this program have been met. The purpose of such reviews shall be to determine the effectiveness of its compliance program, and whether any revision or corrective action is required.

i. The reviews may be carried out by the compliance officer, compliance committee, external auditors, or other staff designated by the required provider, provided however, that such other staff have the necessary knowledge and expertise to evaluate the effectiveness of the components of the compliance program they are reviewing and are independent from the functions being reviewed.

ii. The reviews should include on-site visits, interviews with affected individuals, review of records, surveys, or any other comparable appropriate method, provided that such method does not compromise the independence or integrity of the review.

iii. The required provider shall document the design, implementation and results of its effectiveness review, and any corrective action implemented.

iv. The results of annual compliance program reviews shall be shared with the chief executive, senior management, compliance committee and the board of directors.

Excluded providers. Sinergia shall confirm the identity and determine the exclusion status of affected individuals.

i. In determining the exclusion status of a person required providers shall review the following State and Federal databases at least every thirty (30) days:
   - New York State Office of the Medicaid Inspector General Exclusion List;
   - Health and Human Services Office of Inspector General's List of Excluded Individuals and Entities

ii. Required providers shall require contractors to comply with the provisions of this paragraph.

The required provider shall promptly share the results of the activities required by this subdivision with the compliance officer and the compliance committee.

7. RESPONDING TO COMPLIANCE ISSUES.

As part of Sinergia's commitment to foster a culture of compliance and to support the integrity of the Medicaid program, Sinergia has established procedures for responding to Medicaid compliance issues as they are raised, investigating compliance issues as identified in the course of internal auditing and monitoring, correcting such problems promptly and thoroughly to reduce the potential for reoccurrence, and ensuring ongoing compliance with state and federal laws, rules and regulations. The system for responding to Under the direction of the Compliance officer, all complaints and allegations of Medicaid misconduct, fraud, waste, and abuse will be reviewed and investigated as follows:

a. Upon the detection of potential compliance risks and compliance issues, the compliance officer compliance officer will be responsible for directing the investigation and determining what, if any, corrective action is required, and likewise promptly have implemented such corrective action.
b. The compliance officer shall document its investigation of the compliance issue which shall include any alleged violations, a description of the investigative process, copies of interview notes and other documents essential for demonstrating that the required provider completed a thorough investigation of the issue.
c. Where appropriate, Sinergia may retain outside experts, auditors, or counsel to assist with the investigation.
d. Sinergia shall document any disciplinary action taken and the corrective action implemented.
e. If Sinergia identifies credible evidence or credibly believes that a state or federal law, rule or regulation has been violated, Sinergia shall promptly report such violation to the appropriate governmental entity, where such reporting is otherwise required by law, rule or regulation. The compliance officer shall receive copies of any reports submitted to governmental entities.

8. NON-RETALIATION AND NON-INTIMIDATION

Sinergia prohibits all forms of retaliation, intimidation, and harassment against an individual who makes a good-faith report of known or suspected non-compliance with this Policy, the

Personnel Practices Manual, a Sinergia policy or procedure or an applicable law or regulation. Sinergia will not penalize any individual making such a report. Sinergia will take appropriate disciplinary action against anyone who penalizes or intimidates an individual for reporting such a concern in good faith. However, this policy of non-retaliation and non-intimidation does not preclude Sinergia from taking disciplinary action against anyone who behaves improperly or inappropriately. You must cooperate fully and honestly with any investigation regarding a reported violation of this Policy.

9. EMPLOYEE HANDBOOK

Sinergia's Employee Handbook shall include a discussion of federal and state laws law that prohibit the knowing submission of false claims or statements to the government for payment and Sinergia's policy on the prevention of fraud, waste and abuse.

10. RECORDS RETENTION

Sinergia shall retain all records demonstrating that it has adopted, implemented and operated an effective compliance program and has satisfied the requirements of 18 NYCRR Part 521. Sinergia shall make available to the department, OMIG, or the Attorney General's Medicaid Fraud Control Unit upon request, copies of such records. Under the federal False Claims Act, and in accordance with *Cochise Consultancy, Inc. v. United States ex rel. Hunt,* 139 S. Ct. 1507 (2019) records should be retained for a period of 10 years to avoid potential liability.