

Catholic Charities of the
Roman Catholic Diocese of Syracuse, NY

Compliance Plan

Corporate Board of Trustees Approval:

Approved March 18, 2004

Revised and Approved December 19, 2007

Revised and Approved March 25, 2009

Revised and Approved December 16, 2009

Revised May 1, 2012

Revised and Approved May 28, 2014

Revised December 20, 2016

Revised January 23, 2017

**Catholic Charities of the Roman Catholic Diocese of Syracuse
Table of Contents**

Section Name	Page
Definitions	1
Healthcare Laws & Regulations	4
Compliance Policy	7
Code of Ethics.....	9
Role of Compliance Officer.....	11
The Structure, Duties and Role of the Compliance Committees.....	13
Education and Training.....	15
Effective Confidential Communication.....	16
Enforcement of Compliance Standards	17
Auditing and Monitoring of Compliance Activities.....	18
Detection and Response	19
Whistleblower Provisions and Protections	20
Compliance Officers & Executive Directors Contact Information	Appendix A

Compliance Plan Definitions

As used in the Plan, these terms have the following meanings:

Abuse

Actions that do not involve intentional misrepresentations of fact, but nevertheless are inconsistent with sound financial, business, or healthcare practices and create significant risk to the integrity of the organization such as 1) unnecessary cost to the programs, 2) reimbursement for services that are not medically necessary, or 3) reimbursement for services that fail to meet professionally recognized standards of care.

Agents

Any person or business that acts as a representative of or has the authority to act for or on behalf of Catholic Charities.

Anti-kickback statute

The federal statute, as it relates to healthcare, which prohibits anyone from knowingly and willfully soliciting, receiving, offering, or paying any remuneration directly or indirectly, in cash or in kind, in exchange for services or purchases for which payment may be made by Medicare and/or Medicaid.

Area

A separate geographical part of Catholic Charities on a county basis.

Catholic Charities

Catholic Charities of the Roman Catholic Diocese of Syracuse, NY, a not-for-profit corporation organized under New York law in 1925.

Coding

The process of utilizing a medical classification system to assign a numeric code to diagnostic and procedural data.

Area Compliance Committee

A group of people designated and chaired by the Compliance Officer to oversee and help administer this Compliance Plan for each Area.

Area Compliance Officer

A person within the organization who is assigned the responsibility of maintaining and overseeing an effective Compliance Plan for each Area.

Compliance Plan (“Plan”)

This Plan, which establishes the standards of conduct for Catholic Charities designed to promote honest and ethical behavior, which also provides a structure for educating and communicating those standards to employees, with the overall objective to prevent, detect, and report significant noncompliance.

Diocesan Compliance Committee

A group of people designated by the Diocesan Catholic Charities Executive Director and chaired by the Compliance Consultant to oversee and help administer this Compliance Plan.

Federal Program

Medicare, Medicaid, and any other programs funded by the Federal government.

Fraud

Intentional misrepresentation designed to induce reliance by another person to obtain an unauthorized benefit.

Governing Bodies

The governing bodies of Catholic Charities are: the Corporate Board of Trustees, and the Broome County, the Chenango County, the Cortland County, the Oneida/Madison Counties, the Onondaga County, and the Oswego County Boards of Directors.

Governmental agencies

Agencies involved in healthcare investigations include, but are not limited to, the U.S. Department of Health and Human Services’ Office of Inspector General, U.S. Department of Justice, Federal Bureau of Investigation, Centers for Medicaid and Medicare Services, New York State Department of Health, Office of the Medicaid Inspector General, New York State Medicaid Fraud Control Units, New York State Office for People With Developmental Disabilities, Office of Mental Health, and Office of Alcohol and Substance Abuse Services.

Knowingly

To act “knowingly” is to act with actual knowledge, deliberate ignorance, or a reckless disregard for the truth or the falsity of information.

Misconduct

Any action, behavior, or failure to act that is not in conformity with Catholic Charities’ standards, guidelines, or procedures or that is a violation of any federal, state, or local law or regulation.

Negligent

Exhibiting lack of due care or concern.

Non-compliance

Failure or refusal to act in accordance with this Compliance Plan, or other standards or procedures, or with federal, state, or local laws or regulations.

Private pavor programs

Any payor of healthcare services other than Medicare or Medicaid, including but not limited to private individuals and insurance plans.

Qui Tam Relator

Individuals who bring an action on behalf of the United States under the federal False Claims Act or on behalf of New York State under the New York State False Claims Act. Qui Tam Relators may share in a percentage of the proceeds from an FCA action or settlement. Also known as “whistleblowers”.

Regulatory violation

Any action that constitutes fraud, abuse, or a violation of a federal, state, or local law or regulation.

State program

Medicaid or any other program funded in whole or part by New York State.

Waste

Unnecessary expenditures or to use carelessly.

Whistleblower

See Qui Tam Relator.

Whistleblower Protection

Protection provided under the federal law and the State False Claims Act to whistleblowers or qui tam relators who are discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against in the terms and conditions of their employment as a result of their furtherance of an action under the federal law or the State False Claims Act.

Compliance Plan Healthcare Laws & Regulations

Set forth below are some of the major federal statutes specifically applicable to healthcare providers. This outline is not intended to identify all applicable laws. Employees, independent practitioners, agents and vendors should promptly consult the Compliance Officer with specific questions.

Anti-Kickback Law

Offering, paying, soliciting, or receiving any remuneration, in cash or kind, in return for or to induce the referral of an individual for a service or supply payable under any federal healthcare program. Remuneration may include kickback payments, bribes, rebates, etc.

Federal False Claim Act

A Federal law that imposes liability on any person who submits a claim to the Federal government that he or she knows (or should know) is false. The False Claims Act also imposes liability on an individual who may knowingly submit a false record in order to obtain payment from the government. The third area of liability includes those instances in which someone may obtain money from the Federal government to which he or she may not be entitled, and then uses false statements or records in order to retain the money. The Act provides that private parties may bring an action on behalf of the United States. These private parties are known as “qui tam relators”.

HIPAA

A federal law titled “Health Insurance Portability and Accountability Act”. Regulations issued under HIPAA protect the privacy of health information and identifying information for all Americans. HIPAA went into effect on April 14, 2003.

New York State False Claims Act

New York’s false claims laws fall into two categories: civil and administrative laws; and criminal laws. Some apply to recipient false claims and some apply to provider false claims, and while most are specific to healthcare or Medicaid, some of the “common law” crimes apply to areas of interaction with the government.

Civil and Administrative:

Closely tracks the federal False Claims Act. It imposes penalties and fines on individuals and entities that file false or fraudulent claims for payment from any state or local government, including healthcare programs such as Medicaid.

Criminal:

Various laws, including Social Services Laws and Penal Laws, detail the penalties, sanctions, and fines associated with submitting or causing to submit a false claim or statement.

Criminal Conspiracy

Participation in any scheme or combination to defraud any governmental healthcare benefit program.

Criminal False Statements Related to Healthcare

Making any false or fraudulent statement or representation regarding a material fact in connection with the delivery or payment for healthcare benefits or services.

Criminal Wire and Mail Fraud

Employing the U.S. Postal Service, a private postal service, or telephone lines to perpetrate a fraud on the federal government. Such actions are also often charged with the Criminal False Claims Act.

Ethics in Patient Referrals Act of 1989 (Stark Law)

Referring any patient for a covered service to a business or provider with which the physician has a direct or indirect financial relationship.

Healthcare Fraud

Knowingly and willfully executing or attempting to execute a scheme to:

- a. defraud any healthcare benefit program, public or private; or
- b. obtain by means of false pretense any money or property owned by or under the control of any healthcare program.

Obstruction of Criminal Investigations of Healthcare Offenses

Willfully preventing, obstructing, misleading, or delaying the communication of information or records relating to a violation of a federal healthcare law to a criminal investigator.

RICO (Racketeer Influenced and Corrupt Organization) and Money Laundering Acts

Using proceeds of any wire or mail fraud to operate any enterprise or to promote the underlying fraud.

Patient Protection Affordable Care Act

The **Patient Protection and Affordable Care Act (PPACA)** is a federal statute that was signed into law in the United States by President Barack Obama on March 23, 2010. The Act is the product of the health care reform agenda of the Democratic 111th Congress and the Obama administration. The law includes numerous health-related provisions to take effect over a four-year period, including prohibiting denial of coverage/claims based on pre-existing conditions, expanding Medicaid eligibility, subsidizing insurance premiums, providing incentives for businesses to provide health care benefits, establishing health insurance exchanges, and support for medical research.

Fraud Enforcement Recovery Act

The **Fraud Enforcement and Recovery Act** of 2009, or **FERA**, Pub.L. 111-21, 123 Stat. 1617, S. 386, is a public law in the United States enacted in 2009. The law takes a number of steps to enhance criminal enforcement of federal fraud laws, especially regarding financial institutions, mortgage fraud, and securities fraud or commodities fraud.

American Recovery Reinvestment Act

The American Recovery and Reinvestment Act of 2009, abbreviated ARRA (Pub.L. 111-5), and commonly referred to as the Stimulus or The Recovery Act, is an economic stimulus package enacted by the 111th United States Congress in February 2009.

The stimulus was intended to create jobs and promote investment and consumer spending during the recession. The Act includes federal tax incentives, expansion of unemployment benefits and other social welfare provisions, and domestic spending in education, health care, and infrastructure, including the energy sector. The Act also includes numerous non-economic recovery related items that were either part of longer-term plans (e.g., a study of the effectiveness of medical treatments) or desired by Congress.

Health Information Technology for Economic Clinical Health Act

The ARRA HITECH Act is concerned with defining the requirements for being compatible with the security and privacy regulations of the Privacy Rule. HITECH also facilitates the expansion of HIPAA Act EMR standards that aid in electronic exchange of health information on a national basis to make medical care more organized and transparent. It is also concerned with putting forth incentives for covered entities that adopt Electronic Health Records (EHR). With HITECH setting new benchmarks for clarifying the requirements to become HIPAA-compliant, those who choose to be non-compliant have become more vulnerable to civil penalties. Further, non-compliance with HIPAA Privacy Rule almost entirely excludes covered entities from receiving any kind of financial incentive for adopting EHR.

Compliance Plan Compliance Policy

I. Policy

It is the policy of Catholic Charities to comply with all applicable federal, state, and local laws and regulations. It is also Catholic Charities policy to adhere to the Code of Ethics adopted by the Corporate Board of Trustees.

II. Commitment

Catholic Charities has always been and remains committed to its responsibility to conduct its affairs with integrity based on sound ethical and moral standards. Catholic Charities will hold our employees, independent practitioners, agents, and vendors to these same standards.

Catholic Charities is committed to maintaining and measuring the effectiveness of its Compliance Plan through monitoring and auditing systems reasonably designed to detect noncompliance by its employees, independent practitioners, agents, and vendors. We shall require the performance of regular, periodic compliance audits by internal and/or external auditors who have expertise in federal and state healthcare statutes, regulations, and healthcare program requirements.

III. Responsibility

All employees, independent practitioners, agents, and vendors shall acknowledge their responsibility to promptly report any instances of suspected or known noncompliance to their immediate supervisor, the Catholic Charities Executive Director, the Area Catholic Charities Executive Director, the Area Catholic Charities Compliance Officer, or the Compliance Hotline. Reports may be made anonymously without fear of retaliation, retribution, or breach of confidentiality. Failure to promptly report known noncompliance or making false reports which were not made in good faith will be grounds for disciplinary action, up to and including termination. Reports related to harassment or other workplace-oriented issues will be referred to Human Resources.

IV. Policies and Procedures

Catholic Charities will communicate its compliance standards and policies through required training initiatives to all employees, independent practitioners, agents, and vendors. Catholic Charities is committed to these efforts through distribution of this Compliance Plan and the Code of Ethics.

V. Catholic Charities' Response

Detected noncompliance, through any mechanism (e.g., compliance auditing procedures or confidential reporting), will be responded to in an expeditious manner. Catholic Charities is dedicated to the resolution of such matters and will take all reasonable steps to prevent further similar violations, including any necessary modifications to the Compliance Plan.

VI. Due Diligence

Catholic Charities will, at all times, exercise due diligence with regard to background and professional license investigations for all prospective employees, independent practitioners, agents, vendors, and members of the Board of Trustees and the Boards of Directors.

Catholic Charities is committed to maintaining high quality care and service as well as integrity in its financial and business operations. Therefore, Catholic Charities will conduct appropriate screening of key providers, employees, independent contractors, and business vendors to ensure that they have not been sanctioned by federal or state law enforcement, regulatory or licensing agency.”

In addition, all prospective employees, independent practitioners, agents, vendors, and members of the Board of Trustees and the Boards of Directors will be checked to verify that they have not been excluded from federal healthcare programs.

Compliance Plan Code of Ethics

I. Philosophy

The Catholic Church has a long-standing commitment to the respect and dignity of all life. It is important that all employees are aware of the Church's position as they begin employment or affiliation with Catholic Charities, and that they respect the position in their behavior and conduct as employees and as representatives of Catholic Charities throughout the community.

II. Mission

Catholic Charities of the Roman Catholic Diocese of Syracuse, N.Y. is dedicated to caring for those in need while promoting human development, collaboration, and the elimination of poverty and injustice. We strive to empower those served to transform their lives in the spirit of God's love and compassion.

III. Value Statements

Each Catholic Charities Trustee, Director, employee, agent, and vendor shall:

- Support the dignity of human life,
- Prefer those suffering – the neediest and most vulnerable among us,
- Support the right of all to set and pursue their life goals,
- Strive for full measure of charity and justice,
- Seek to peaceably change oppressive laws,
- Respect privacy and confidentiality,
- Strive for quality and excellence,
- Support pluralism, and
- Promote honesty in all areas.

IV. Code of Ethical Conduct

It is the policy of Catholic Charities to conduct all business and activities in accordance with uncompromising ethical standards. We are committed to complying with all applicable laws and regulations. We believe integrity and trust are essential to the mission of serving our consumers. Adherence to such standards will not be traded or compromised for financial, professional, or other business objectives.

We ensure that all aspects of consumer care and business conduct are performed in compliance with our mission/vision statement, policies and procedures, professional standards and applicable governmental laws, rules and regulations.

Catholic Charities expects every person who provides services to our consumers to adhere to the highest ethical standards and to promote ethical behavior. Anyone whose behavior is found to violate ethical standards will be disciplined appropriately.

V. Expectations

Each person subject to this Code of Ethics shall ensure that all aspects of client care and business conduct are performed in compliance with Catholic Charities' mission/vision statement, policies and procedures, professional standards, applicable governmental laws, rules, and regulations, and other payor standards. Catholic Charities expects every person who provides services to adhere to the highest ethical standards and to promote ethical behavior. Any person whose behavior is found to violate ethical standards will be disciplined appropriately.

Employees may not engage in any conduct that conflicts – or is perceived to conflict – with the best interests of Catholic Charities. An employee must promptly disclose to his or her immediate supervisor any circumstances where the employee or his or her immediate family member is an employee, consultant, owner, vendor, or investor in any entity that (i) engages in any business or maintains a relationship with Catholic Charities; (ii) provides to, or receives from, Catholic Charities any consumer referrals; or (iii) competes with Catholic Charities.

Employees shall maintain complete, accurate, and contemporaneous records as required by Catholic Charities. The term “records” includes all documents, both written and electronic, that relates to the provision of Catholic Charities services or provides support for the billing of services. Records must reflect the actual service provided. Any records to be appropriately altered must reflect the date of the alteration, the name, signature, and title of the person altering the document, and the reason for the alteration, if not apparent. No person shall ever sign the name of another person to any document. Backdating and predating documents is unacceptable and will lead to discipline up to and including termination.

When any person knows or reasonably suspects that the requirements above have not been met, this must be promptly reported to their immediate supervisor, the Catholic Charities Executive Director, the Area Catholic Charities Executive Director, the Area Catholic Charities Compliance Officer or the Compliance Hotline

The Catholic Charities Executive Director, the Area Catholic Charities Executive Directors, the Area Catholic Charities Compliance Officers or the Compliance Consultant may be reached at the e-mail addresses and the telephone numbers set forth on Appendix A, attached.

Compliance Plan Role of Compliance Officers

I. Catholic Charities Diocesan Compliance Consultant

The Corporate Board of Trustees of Catholic Charities will designate a consultant with expertise in healthcare regulatory compliance as Catholic Charities Compliance Consultant. The Compliance Consultant position reports directly to the Catholic Charities Director. The Compliance Consultant has direct lines of communication to the Area Executive Directors and the Area Boards of Directors with input and approval of the Area Executive Director and the Catholic Charities Director.

Job Duties: The Compliance Consultant is directly obligated to serving the best interests of Catholic Charities. Responsibilities of the Compliance Consultant include but are not limited to:

- Facilitate ongoing Governance Compliance Committee meetings
- Create a summary report of Diocesan wide compliance activities, investigations and reviews, and report annually, or as needed, to the Board of Trustees
- Act as a resource for Area Compliance Officers, the Area Boards of Directors, the Corporate Board of Trustees, and staff
- Facilitate review and modification (as needed) of policies and procedures
- Assist in the identification, standardization, and/or creation of additional required or desired policies and procedures.
- Assist in the event of a government audit
- Remain available for off-site (via telephone, email, and facsimile) and on-site consultation at the request of Catholic Charities

II. Area Compliance Officers

Each Catholic Charities Area has designated a Compliance Officer. Each Area Compliance Officer (ACO) works closely with the Area Executive Director to administer the Compliance Plan within the Area.

Job Duties

Each ACO is also obligated to serve the best interests of the Catholic Charities, clients, and employees. Each ACO works closely reports directly to the Area Executive Director of their Area. The ACO has direct lines of communication to the Catholic Charities Director and the Corporate Compliance Consultant.

Responsibility of the ACO is to ensure the completion of the following, including but not limited to:

- Identification of corresponding Area risk areas.
- Design and implementation of area-specific internal auditing and monitoring protocols.
- Employee training in compliance.
- Facilitation of Area Compliance Committees.
- Creation of an Area specific Annual Compliance Work Plan.
- Presentation of Area Work Plans to Governance Compliance Committee.
- Participation in all Governance Compliance Committee meetings and activities.
- Report compliance activities to their Area Board of Directors as scheduled by the Area Executive Director, at least annually and as needed.

Compliance Plan

The Structure, Duties and Role of the Compliance Committees

I. Diocesan Compliance Committee - Reporting Structure and Purpose

The Governance Compliance Committee is facilitated by the Catholic Charities Diocesan Compliance Consultant and is composed of all Area Compliance Officers from each Area and the Catholic Charities Director.

The purpose of the Governance Compliance Committee is to advise and assist the Catholic Charities Compliance Consultant with the implementation of the Compliance Plan. The Committee assists with, and makes recommendations for, the development of policies which are set by the Board of Trustees.

Diocesan Compliance Committee – Function

Diocesan Compliance Committee is responsible for:

- Ongoing analysis of the environment in which Catholic Charities conducts its operations, including legal requirements with which it must comply.
- Ongoing review, modification, and creation, where necessary, of policies and procedures which address areas of risk, and which respond to new legislation and other mandates.
- Monitoring internal systems and controls to enforce compliance standards, policies, and procedures.
- Monitoring internal and external audits to identify and address potential non-compliance issues.
- Review corrective and preventive action plans.
- Participating in processes designed to solicit, evaluate, and respond to compliance complaints and issues.

II. Area Compliance Committees – Reporting Structure and Purpose

Each Area Compliance Committee is facilitated by the Area Compliance Officer and is composed of management and/or staff from each Area. Each ACO and Area Executive Director will determine the composition of their Area Compliance Committee, including the option to include a member of the Area Board of Directors as a regular member of the committee, and the frequency of meetings.

Area Compliance Committees – Function

Area Compliance Committees are responsible for:

- Working with individual programs to develop standards, policies, and procedures that address specific risk areas and to comply with legal and ethical requirements.
- Advising and monitoring appropriate departments relative to compliance matters.
- Development of internal systems and controls to carry out compliance standards and policies.
- Monitoring internal and external audits to identify potential non-compliant issues.
- Implementing corrective and preventive action plans.
- Developing a process to solicit evaluate and respond to complaints and issues.
- Holding regularly scheduled meetings according to an annual schedule, published within the first quarter of every calendar year.
- Providing representation at Diocesan Compliance Committee meetings.

Compliance Plan Education and Training

I. Expectations

Compliance training is a critical element of the Catholic Charities Compliance Program. Every employee and agent is expected to be familiar and knowledgeable about Catholic Charities Compliance Plan and to have a solid working knowledge of his or her responsibilities under the Plan. Compliance policies and standards will be communicated to all employees through training programs that are mandatory for all employees, vendors, and agents.

II. Training Topics – General

All employees and agents shall participate in training on the topics identified below:

- Government and private payor reimbursement principles, as applicable
- Government initiatives, as applicable
- General prohibitions on paying or receiving remuneration to induce referrals
- Proper documentation of services rendered
- Duty to report misconduct
- Federal False Claims Act provisions
- New York State False Claims Act provisions
- Whistleblower protection
- Non-Retaliation Policy and Procedure
- How to report suspected non-compliance
- Steps we take to identify, address, and prevent fraud and abuse
- Record Retention

III. Orientation

As part of their orientation, each employee and agent will receive a written copy of this Compliance Plan. As a routine part of orientation, new employees and agents are required to attend mandatory training on compliance during which the Compliance Plan is reviewed. Each employee and agent is required to sign an Employee Attestation Statement during orientation and annually, a Conflict of Interest Statement. Each employee and agent is required to document all relationships that are or could be perceived to be a conflict of interest during their orientation and annually thereafter.

IV. Attendance

All education and training relating to the Compliance Plan will be verified by attendance and a signed acknowledgement of receipt of the Compliance Plan.

Attendance at compliance training sessions is mandatory and is a condition of continued employment.

Compliance Plan Effective Confidential Communication

I. Expectations

Open lines of communication between Compliance Officers and every employee and agent subject to this Plan are essential to the success of the Compliance Plan. Every employee and agent has an obligation to refuse to participate in any wrongful course of action and to promptly report the actions according to the procedure listed below.

II. Reporting Procedure

If an employee or agent witnesses, learns of, or is asked to participate in an activity that could potentially violate or is suspected or known to violate any Catholic Charities' policy or any law or regulation, he or she must promptly report the request or the activity. Employees and agents should endeavor to first contact their immediate supervisor or the Area Compliance Officer. If that person is not available, or the reporter has reason to believe that the supervisor or Area Compliance Officer is a party to the activity, then the employee or agent should promptly contact the Area Director, or the Catholic Charities Diocesan Director.

Upon receipt of a question or concern, any supervisor, officer, or director shall document the issue at hand and report to the ACO. Any questions or concerns relating to potential non-compliance by the ACO should be reported immediately to the Catholic Charities Diocesan Executive Director or Compliance Consultant. The ACO may, at any time, contact the Compliance Consultant for advice, counsel, assistance, and/or support.

The ACO or designee shall record the information necessary to conduct an appropriate investigation of all complaints. If the employee was seeking information concerning the Corporate Compliance Plan (inclusive of policies and procedures) or its application, the ACO or designee shall record the facts of the contact and the nature of the information sought and respond as appropriate. Catholic Charities maintains a confidential and anonymous hotline, via an external vendor, that protects that anonymity of the individual making a report.

III. Protections

The identity of reporters will be safeguarded to the fullest extent possible. Employees and agents will be protected against retaliation and/or intimidation of any kind. Any threat of retaliation and/or intimidation against a person who acts pursuant to his or her responsibilities under this Plan is acting against the Catholic Charities Compliance Plan. Discipline, up to and including termination of employment, will result if such retaliation and/or intimidation is proven.

IV. Guidance

Any employee or agent may seek guidance with respect to the Compliance Plan and any related document, policy, or procedure at any time by following the reporting mechanisms outlined above. Any employee or agent who has concerns about activities, information, or compliance policies may seek guidance from the Area Compliance Officer or the Catholic Charities Compliance Consultant.

Compliance Plan Enforcement of Compliance Standards

I. Background Investigations

Catholic Charities must comply with numerous employment requirements including but not limited to background checks, etc.

II. Disciplinary Action - General

All Employees and agents (including Board Members) who fail to comply with Catholic Charities Compliance Plan, or who have engaged in conduct that has the potential of impairing the Catholic Charities' status as a reliable, honest, and trustworthy service provider, will be subject to disciplinary action, up to and including termination and/or separation. Any discipline will be appropriately documented and will be summarized in the Compliance Log.

III. Performance Evaluation – Supervisory

Catholic Charities Compliance Plan requires that the promotion of, and adherence to, the elements of the Compliance Plan be a factor in evaluating the performance of Catholic Charities employees and agents.

Employees and agents will be periodically trained in new compliance policies and procedures. In addition, all managers and supervisors will:

- a. Discuss with all supervised employees the compliance policies and legal requirements applicable to their function.
- b. Inform all supervised personnel that strict compliance with these policies and requirements is a condition of employment.
- c. Disclose to all supervised personnel that Catholic Charities will take disciplinary action up to and including termination or revocation of privileges for violation of these policies and requirements.

IV. Disciplinary Action - Supervisory

Supervisors will be disciplined for failure to adequately instruct their subordinates or failure to detect noncompliance with applicable policies and legal requirements, where reasonable diligence on the part of the manager or supervisor would have led to the earlier discovery of any problems or violations.

Compliance Plan Auditing and Monitoring of Compliance Standards

I. Internal Audits

Ongoing evaluation is critical in detecting non-compliance and will help ensure the success of Catholic Charities Compliance Plan. At the Area level, routine internal audits identify areas of non-compliance with policy and procedure and monitor compliance with governing regulations.

The audits will examine Catholic Charities' compliance with specific rules and policies through on-site visits; employee and/or agent interviews; general questionnaires; review of contracts, personnel records, training records, billing and other financial records; and client record documentation reviews.

Compliance Plan Detection and Response

I. Violation Detection

The Area Compliance Officer, in consultation with the Area Director, and/or the Diocesan Compliance Consultant will determine whether there is any basis to suspect that a violation of the Compliance Plan has occurred.

In the event that the violation or potential violation appears to have merit, the Area Compliance Officer and Area Director, with input from the Catholic Charities Diocesan Director, will if necessary, refer the matter to legal counsel who, with the assistance of appropriate personnel, shall conduct a more detailed investigation

II. Reporting

At the conclusion of an investigation involving legal counsel, counsel may be asked to issue a written report summarizing the findings, conclusions, and recommendations and rendering an opinion as to whether a violation of the law has occurred. Any written report will be sent by the Area Compliance Officer to the Area Director, Catholic Charities Compliance Consultant, and the Catholic Charities Director. In all cases, the outcome of the investigation and any written report will be presented to the appropriate Area Executive Director and the Area Compliance Officer, as well as the Area and Corporate Boards.

III. Repayment of Any Substantiated Overpayment

If Catholic Charities identifies that an overpayment has been received from any third party payor, including Medicaid, Medicare, private insurance, private payment, or another funding source, the overpayment shall be promptly and fully repaid to the affected payor. Systems that allowed for the overpayment will be examined, modified, and monitored so as to prevent such overpayments in the future.

IV. Record Keeping

Regardless of whether a report is made to a governmental agency, the Area Compliance Officer shall maintain a record of the investigation, including copies of all pertinent documentation. This record will be considered confidential and privileged to the fullest extent permitted by law and will not be released without the prior written approval of the Catholic Charities Diocesan Director and legal counsel. All compliance records will be kept in a secure area accessible to authorized personnel only.

Compliance Plan Whistleblower Provisions and Protections

I. Provisions

The False Claims Act provides protections to qui tam relators who are discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against in terms and conditions of their employment as a result of their furtherance of an action under the False Claims Act. Federal law also prohibits retaliation against whistleblowers.

Catholic Charities will not take any retaliatory action against an employee if the employee, in good faith, discloses information about Catholic Charities policies, practices, or activities to a regulatory, law enforcement, or other similar agency or public official. Protected disclosures includes those that, in good faith, assert that the employer is in violation of a law that creates a substantial and specific danger to the public health and safety or which constitutes healthcare fraud under the law, or that assert that the employee believes constitute improper quality of patient care.

II. Protections

An employee's disclosure is protected only if the employee first brought up the matter with a supervisor and gave the employer a reasonable opportunity to correct the alleged violation, unless the danger is imminent to the public or patient and the employee believes in good faith that reporting to a supervisor would not result in corrective action.

Appendix A
 Catholic Charities
 Directory of Area Compliance Officers, Area Executive Directors,
 Catholic Charities Compliance Officer and Catholic Charities Director

AREA:

Broome County

Compliance Officer: Pearl Reed-Klein preedklein@ccbc.net (607) 729-9166
 Executive Director: Lori Accardi laccardi@ccbc.net (607) 729-9166

Chenango County

Compliance Officer: Stephanie Stewart sstewart@ccofcc.com (607) 334-8244
 Executive Director: Robin Cotter rcotter@ccofcc.com (607) 334-8244

Cortland County

Compliance Officer: Timothy Lockwood tlockwood@ccooc.org (607) 756-5992, x112
 Executive Director: Marie Walsh mwalsh@ccooc.org (607) 299-4164

**Oneida/Madison
 Counties**

Compliance Officer: Anne Marie Storey astorey@ccharityom.org (315) 724-2158,x7009
 Executive Director: Denise Cavanaugh dcavanaugh@ccharityom.org (315) 724-2158,x7000

Onondaga County

Compliance Officer: Candace Murray candace@ccoc.us (315) 424-1800, 8133
 Executive Director: Michael Melara mmelara@ccoc.us (315) 424-1800, 7512
 Toomey Exec. Dir.: Judy D'Amore jdamore@ccoc.us (315) 362-7588

Oswego County

Compliance Officer: Lori Perrault lperrault@ccoswego.com (315) 598-3980, x225
 Executive Director: M. M. Pezzella-Pekow mmpekow@ccoswego.com (315) 598-3980, x223

* * * * *

Catholic Charities Compliance Consultant:

Paul Mayer (The Bonadio Group) pmayer@bonadio.com (585) 249-2718

Catholic Charities Director:

Mike Melara (315) 424-1800

Catholic Charities Compliance Hotline:

(866) 460-2024