



# **Nuvance Health**

## **Corporate Compliance Program Plan and Manual**

**June 2024**

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## **I. Introduction**

The purpose of Nuvance Health's Corporate Compliance and Ethics Program (the "Compliance Program") is to promote the highest ethical standards and to conduct our business in compliance with all Federal and State health care program rules, regulations and standards, as well as other applicable laws, statutes, and regulations, with particular reference to the standards established by the Office of Inspector General ("OIG") of the Department of Health and Human Services ("HHS") compliance program guidance and the New York State Office of the Medicaid Inspector General ("OMIG"). The Nuvance Health Compliance Program ("Compliance Program" or the "Program") is established by the Compliance and Ethics Program Charter. This Compliance Program Plan and Manual (the "Plan") describes the requirements of the Program and outlines the proposed strategy related to: (i) the establishment, annual review and updating of written policies and procedures; (ii) the implementation of an annual training and education plan; (iii) the performance of ongoing auditing and monitoring activities including, the identification and addressing of compliance risks and the development of associated compliance work plans, and where applicable, risk control measures; (iv) the establishment and implementation of procedures, systems, and controls for responding to compliance issues as they are raised; and (v) the fulfillment of the remaining elements of the Program; and is applicable to all Workforce Members of Nuvance Health and its affiliates.

The Program strives to create a culture of ethical conduct that promotes the prevention, detection, and correction of instances of behavior that do not conform to Federal and State law or any other health care program requirements. This Plan is not intended to fully address all applicable laws, regulations, or professional standards, but to outline our commitment to the implementation and maintenance of an effective Compliance Program. The Plan will be updated and revised regularly to reflect changes in the regulatory environment.

## **II. Reason for Being**

Nuvance Health is committed to furthering its charitable purpose by providing the community with high quality and service excellence pursuant to the highest ethical, business, and legal standards. These high standards must apply to all of our patients, other health care providers, companies with whom we do business, government entities to whom we report, and the public and private entities from which reimbursement for services is sought and received. Nuvance Health will not tolerate any form of unlawful or unethical behavior by anyone associated with the organization. To ensure that these expectations are met, the Compliance Program has become an integral part of our corporate mission and business operations.

## **III. General Standards**

### ***Cooperation with the Compliance Program***

All Nuvance Health Workforce Members are required to fully support the implementation and on-going maintenance of the Compliance Program. Workforce Members must cooperate with all inquiries concerning possible improper business, documentation, coding, or billing practices; respond to reviews or inquiries; and actively work to correct improper

practices. Success of the Nuvance Health's Compliance Program is the responsibility of all Workforce Members.

### ***Honest, Ethical and Lawful Conduct***

Nuvance Health further expects all Workforce Members to comply and be familiar with all Federal and State laws, rules, and regulations that govern their job or work, and with Nuvance Health's policies, procedures and standards of conduct implemented to help ensure compliance with these rules and regulations. All physicians and providers, coders and billing personnel are expected to comply specifically with Federal and State requirements regarding medical necessity, documentation, and coding. Workforce Members must avoid any action that they believe may violate laws, rules or regulations, both in business and business-related personal matters. If Workforce Members are unsure whether an action is lawful, they are expected to refrain from taking further action until they check with their supervisor or the Chief Compliance, Audit & Privacy Officer ("CCAPO").

## **IV. Compliance Program Plan and Manual**

The Nuvance Health Compliance Program includes seven (7) core elements developed based on the expectations of OIG and OMIG.

### **Element I - Written Policies and Procedures and Code of Conduct**

#### ***Written Policies and Procedures***

To help ensure our business is conducted in accordance with Federal, State, and local laws, professional standards, and applicable Federal health care program requirements, Nuvance Health has implemented many compliance policies, procedures, and standards. Every Workforce Member is expected to be familiar, and comply with, Nuvance Health policies, procedures, and standards applicable to their job responsibilities. Strict compliance with Compliance policies and procedures is a condition of employment and, therefore, violation of any of these standards may result in disciplinary action up to, and including, termination of employment or severance of our business relationship.

#### ***Code of Conduct***

To further promote adherence to the Nuvance Health Compliance Program and established policies and procedures, Nuvance Health has implemented a Code of Conduct and a Code of Conduct and Business Ethics ("Code of Conduct"). The Code of Conduct is a reference guide that describes applicable standards and iterates the organization's core values and cultural attributes. All Workforce Members and agents are required to sign a Code of Conduct Acknowledgement at the time of employment or initiation of a business relationship with Nuvance Health, and annually, to ensure receipt, comprehension, and adherence to Nuvance Health standards.

Compliance Program policies, procedures and the Code of Conduct are always available via the internet and intranet websites and the internal policy management platform, Ellucid. Annually, and more frequently as appropriate, Nuvance Health will assess and revise, as necessary, policies and procedures and the Code of Conduct. Workforce Members are

expected to perform his or her duties in good faith, and with due care that a reasonably prudent person in the same position would use under similar circumstances. Any attempt to circumvent the law by inappropriate means or questionable interpretations is strictly prohibited. Leadership at every level will embrace the obligation to provide training, leadership, guidance, and help Nuvance Health Workforce Members meet the expectations outlined in the Code of Conduct and in written policies and procedures. Nuvance Health ethical standards mandate an affirmative duty on the part of all Workforce Members to report any actual or suspected breach of ethical standards. This includes, but is not limited to, fraudulent, unethical, illegal, wasteful, abusive, or questionable behavior in the workplace. This mandate and obligation applies equally to all Nuvance Health Workforce Members and leadership positions. Moreover, every Nuvance Health Workforce Member has an obligation to be honest in all dealings with clients, patients and their family members, vendors, third-party payors, medical staff members and other providers, and other Nuvance Health Workforce Members.

### ***Whistleblower Protection Policy***

Nuvance Health's Whistleblower Protection policy provides Workforce Members who make a report, complaint, or inquiry in good faith, with protection from retaliatory action, including with respect to reporting of False Claims Act complaints and/or reporting to appropriate officials. Nuvance Health has a no-tolerance policy for intimidation of, or retaliation taken against, individuals making such good faith reports, complaints or inquiries and shall take disciplinary action against individuals who are determined to have intimidated or retaliated against such individuals.

### ***Medical Billing and Coding Policies and Procedures***

Nuvance Health will take proactive measures to ensure only claims for services that are reasonable and necessary, given the patient's condition, are billed. We take great care to assure all billings to the government, third-party payors, and patients, are accurate and conform to all applicable Federal and State laws and regulations. Physicians and other providers are expected to exercise sound ethical and professional judgment with regard to recommending and ordering tests to treat and diagnose patients. Documentation to support the submission of claims must be complete, must evidence the delivery of the service, must demonstrate that services were provided at the level billed, and were medically necessary. All services performed and/or ordered must be within the scope of the ordering provider's medical or clinical licensure.

We prohibit any Workforce Member or agent of Nuvance Health from knowingly presenting, or causing to be presented, claims for payment or approval that are false, fictitious, or fraudulent. Nuvance Health monitors and verifies that claims are submitted accurately and appropriately.

## **Element II - Compliance Officer, Compliance Committee and High-Level Oversight**

### ***Chief Compliance, Audit & Privacy Officer***

The CCAPO has been appointed to maintain and oversee the day-to-day operations of the

Compliance Office. The CCAPO is the focal point for compliance activities for all affiliates of Nuvance Health and is responsible for the development, implementation, and oversight of the daily operation of the Program. The CCAPO has the express authority to review all documents and other information that is relevant to compliance activities, including but not limited to: patient records, compensation documents, billing records, records concerning marketing efforts, and records of arrangements with other parties. The CCAPO will also be informed of, and have access to, all information concerning overpayments made to Nuvance Health and all pertinent audits, reviews, or investigations by any State or Federal governmental agency.

The CCAPO reports directly to the Nuvance Health Chief Executive Officer (“CEO”) and to the Nuvance Health Audit and Compliance Committee of the Board of Trustees (“Audit and Compliance Committee”).

### ***Board of Trustees (“Board”)***

The Board is ultimately accountable for oversight of the Compliance Program and conducts that oversight through its Audit and Compliance Committee. The Audit and Compliance Committee is composed of members of the Board and includes independent (non-executive) members.

### ***Audit and Compliance Committee***

The Audit and Compliance Committee works with the CCAPO and is responsible to oversee the effectiveness of the Program and ensuring the Compliance Office is sufficiently resourced based upon an assessment of risk and the need for program improvement. The Audit and Compliance Committee is further responsible for evaluating the performance of the CCAPO and Executive Compliance Committee (“ECC”). The CCAPO provides regular reports (at least quarterly) and recommendations concerning compliance and privacy matters to the Audit and Compliance Committee. The Audit and Compliance Committee receives training and education on the structure and operation of the Compliance Program and Board member responsibilities. Its members are expected to be knowledgeable about compliance risks and strategies, to understand the measurements of outcomes, and to periodically assess the effectiveness of the Program. The Audit and Compliance Committee, at its discretion, issues directives concerning compliance matters to the CCAPO and/or other Senior Leadership, who carries out such directives. The Audit and Compliance Committee meets at least quarterly and maintains minutes of its meetings and actions (See the “Nuvance Health Audit and Compliance Committee Charter”). Members of Senior Leadership may be invited guests to Audit and Compliance Committee meetings.

### ***Executive Compliance Committee (“ECC”)***

Nuvance Health has established an ECC whose charter outlines executive-level accountability for the oversight of, and guidance to, the Nuvance Health Compliance Program and, more specifically, to the CCAPO and the Compliance Office (See the “Nuvance Health Executive Compliance Committee Charter”). The ECC, comprised primarily of Executive Leadership, meets on at least a quarterly basis and has overall responsibility for the continued improvement of the performance of the Compliance Program, supporting a culture of compliance, and, through the CCAPO, ensuring compliance systemwide. The CCAPO serves as chair of the ECC.

Nuvance Health’s executive officers, including the CEO, recognize the importance of having a robust and effective Compliance Program as being critical to the success of the organization across all lines of business.

**Senior Leadership**

An effective Compliance Program must have the support of Senior Leadership to be successful. Senior Leadership is expected to be actively engaged in ongoing communications regarding requirements of the Program and to ensure the Compliance Program is implemented in their areas of operational responsibility.

**Element III - Effective Training and Education**

The Nuvance Health Compliance Office has developed a training plan which outlines the steps Nuvance has and will take to design, develop and deliver the required training and education to comply with Federal healthcare program and other government or regulatory requirements, including, without limitation, those set forth in New York State Social Services Law (SOS) § 363-d and its implementing New York State Office of Medicaid Inspector General regulations found at 18 NYCRR SubPart 521 (“Part 521”). Nuvance Health may also provide additional training and education consistent with the Compliance Training and Education Policy and Procedure.

The CCAPO, working with Human Resources, Senior Leadership, the ECC, and external resources as necessary, develops and oversees the implementation of organization-wide Compliance Training and Education (“CTE”) programs. To help educate Workforce Members and other agents of Nuvance Health on compliance with applicable Federal and State law, Federal healthcare program requirements, policies and procedures, and standards of conduct, Nuvance Health utilizes several training delivery methods including computer-based training (“CBT”) platforms, live training sessions, and the distribution of self-study training materials in limited circumstances.

Senior Leadership is responsible to ensure that online compliance courses are completed by their operational departments. Compliance education for Workforce Members includes, but is not limited to, three general categories:

- 1) New Hire Orientation (“NHO”);
- 2) Annual Training; and
- 3) Specialized and/or Targeted Education

***New Hire Orientation (NHO)***

All Workforce Members receive a mandatory introduction to the Nuvance Health Compliance Program during NHO. The NHO presentation, at a minimum, includes information on the following topics of the Compliance Program:

- (i) Nuvance’s risk areas as: (a) set forth under 18 NYCRR 521-1.3 [d] including (i) billings; (ii) payments; (iii) medical necessity; (iv) quality of care; (v) governance;



- (vi) mandatory reporting; (vii) credentialing; (viii) ordered services; (ix) contractor oversight; and (b) identified through organizational experience;<sup>1</sup>
- (ii) Nuvance’s written policies and procedures as described in Part 521-1.4(a);<sup>2</sup>
- (iii) The role of the CCAPO and the Executive Compliance Committee (“ECC”);<sup>3</sup>
- (iv) How Covered Individuals can ask questions, seek guidance on compliance-related topics, and report potential compliance-related issues to the CCAPO and senior management, including:<sup>4</sup>
- The mandatory reporting obligations that all Covered Individuals must adhere to, which includes the obligation to report all suspected illegal, unethical, and improper conduct;
  - Information regarding the Nuvance confidential and anonymous helpline and other reporting methodologies and corresponding reporting procedures; and
  - How Nuvance’s Whistleblower protection policies protect reporting Covered Individuals and other reporting stakeholders from intimidation and other forms of retaliation for the good faith participation in the Nuvance Health Corporate Compliance and Ethics Program.
- (v) Nuvance’s disciplinary standards and policies for the engagement of activities prohibited under the Compliance and Ethics Program. Such standards shall, without limitation, emphasize requirements under the Compliance and Ethics Program and Nuvance’s fraud, waste, and abuse prevention activities;<sup>5</sup>
- (vi) How Nuvance responds to, and where necessary, investigates and addresses compliance issues and implements corrective action plans;<sup>6</sup>
- (vii) Requirements specific to Federal healthcare programs (i.e., State Medicaid, Medicare, and CMS) requirements and Nuvance’s category or categories of service;<sup>7</sup>
- (viii) Coding and billing requirements and best practices, if applicable, including avoiding improper coding practices such as DRG creep, duplicate billing, upcoding, unbundling;<sup>8</sup>

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<sup>1</sup> 18 NYCRR 521.1-4 [d][1][i]  
<sup>2</sup> 18 NYCRR 521.1-4 [d][1][ii]  
<sup>3</sup> 18 NYCRR 521.1-4 [d][1][iii]  
<sup>4</sup> 18 NYCRR 521.1-4 [d][1][iv]  
<sup>5</sup> 18 NYCRR 521.1-4 [d][1][v]  
<sup>6</sup> 18 NYCRR 521.1-4 [d][1][vi]  
<sup>7</sup> 18 NYCRR 521.1-4 [d][1][vii]  
<sup>8</sup> 18 NYCRR 521.1-4 [d][1][viii]

- (ix) claim development, preparation, submission, and reimbursement process, if applicable; and
- (x) Nuvance's risk areas and organizational experience and Compliance Program, and all applicable Federal rules, regulations, standards, and health care program requirements, including the requirements of the Anti-Kickback Statute and the Stark Law.

### ***Workforce Member Annual Training***

Workforce Members are required to complete CTE annually. Completion of Annual Training is mandatory and covers the same topics as noted above in NHO as well as additional key compliance policies and procedures. CTE materials are updated regularly, as needed. Failure to complete the assigned Annual Training may result in suspension until such time as the assigned courses are completed and/or termination of employment.

### ***Workforce Member Specialized or Targeted Education***

Workforce Members also receive specialized compliance education as deemed necessary based on any identified potential non-compliance and may include emerging compliance industry risks identified by the Compliance Office.

### ***Medical Staff Training***

Nuvance Health Medical Staff receive compliance education at the time of their initial appointment and annually thereafter.

### ***Management Certification Training***

Certifying Workforce Members receive additional education regarding their responsibilities for monitoring and oversight of activities within their areas of authority.

### ***Board Member Training***

All new members of the Board receive compliance training that addresses corporate governance responsibilities of board members:

- The responsibilities of health care Board Members with respect to review and oversight of the Compliance Program, specifically, to include the risks, oversight areas, and strategic approaches to conduit oversight of a health care entity.

Annually, the Compliance Office, in collaboration with the Legal Services Department, provides updated compliance education to all active Board members.

### ***Vendor Education***

Identified vendors who present on-site at a Nuvance Health facility, are registered in a third-party vendor credentialing software system. These vendors are required to complete education and attest to the "Vendor Code of Conduct" as part of the credentialing process and annually thereafter.

### **Element IV - Effective Lines of Communication**

Nuvance Health has a Disclosure Program in place to receive, record, and respond to compliance inquiries or reports of potential instances of non-compliance. The Disclosure Program fosters an environment that encourages Nuvance Health's Workforce Members to report concerns without fear of retaliation. Further, Workforce Members are required to promptly report, in good faith, suspected or actual violations of Nuvance Health's Code of Conduct, compliance program policies and procedures, and/or with applicable Federal and state healthcare program requirements. The Compliance Office maintains a confidential Disclosure Log and responds to, and investigates, each contact promptly. The CCAPO will ensure that documentation of all compliance inquiries and investigations are maintained, and that corrective action is implemented, as necessary.

#### ***Reporting Methods***

Workforce Members may report instances of perceived or actual non-compliance by contacting any of the following:

- Immediate Supervisor
- Department Director
- Compliance Team Member or Office
- CCAPO
- CEO or any other member of Senior Leadership
- Compliance Helpline (allows for anonymous reports as desired)
- email account [compliance@nuvancehealth.org](mailto:compliance@nuvancehealth.org)

#### ***Compliance Helpline***

The Compliance Helpline ("Helpline") is a confidential resource available to Workforce Members and other interested individuals to report compliance violations, concerns, or questions. The Helpline has trained personnel available to speak with callers at a toll-free number, 24 hours a day, 7 days a week. The Helpline is not set up for caller ID and cannot trace calls. However, callers can offer their identity to provide information that may be necessary in an investigation. Information provided remains confidential to the extent circumstances and the law allow.

**Nuvance Health Compliance Helpline  
Confidential Phone Line Available 24/7  
Phone: 1-844-Yes-WeComply  
(1-844-937-9326)**

**Confidential and anonymous reports may also be submitted online at:  
[www.nuvancehealth.ethicspoint.com](http://www.nuvancehealth.ethicspoint.com)**

The Compliance Disclosure Program is widely publicized through various mediums such as screen-savers on employee computers, internal social media platforms, flyers, posters, memos, etc.

***Confidential, Anonymous and Non-Retaliatory Reporting***

All Workforce Member concerns are handled and investigated in a confidential manner. To the extent possible under the law, the CCAPO will not disclose the identity of anyone who reports a suspected violation of law or who participates in an investigation. Reports can be made without fear of retribution or adverse consequences. Any form of retaliation against Workforce Members or other interested individuals who made a report in good faith, or otherwise participates in the Program, is strictly prohibited. Annual Education will include detailed information to ensure all Workforce Members are aware of the Disclosure Program and the guarantee that their concerns can be reported confidentially, anonymously and without fear of retaliation.

In addition, to help maintain a compliant workplace, Nuvance Health has implemented an Exit Interview process to provide certain employees who are leaving the organization an opportunity to report compliance-related concerns.

***Element V - Well-Publicized Disciplinary Standards***

***Workforce Members***

Any Workforce Members who fail to adhere to the Compliance Program or Code of Conduct, and/or Compliance Policies and Procedures is subject to disciplinary action, up to and including termination of employment. Sanctions range from oral warnings to suspension, privilege revocation, and/or termination.

Nuvance Health has established written policies that define the level of disciplinary action that may be taken against Workforce Members when being disciplined for non-compliance. If, after thorough investigation, a compliance violation is confirmed, the CCAPO, Human Resources and leadership will determine the proper level of sanction. Disciplinary action will be taken on a fair and equitable basis and consistent with Human Resources procedures. The promotion and adherence to compliance is an element in evaluating the performance of all Nuvance Health Workforce Members.

***Medical Staff***

Non-employed credentialed Medical Staff members are evaluated relative to their respective hospital by-laws for failure to adhere to compliance policies and procedures and Code of Conduct.

***Vendors***

Vendors who fail to adhere to the Nuvance Health Compliance Program, Compliance Policies and Procedures, or Code of Conduct, are subject to potential severance of our business relationship.

## **Element VI - Effective System for Routine Monitoring, Auditing and Identification of Compliance Risks**

### ***Compliance Audits***

Nuvance Health will audit, monitor, and conduct self-assessments to proactively identify and address real or potential issues of non-compliance consistent with OIG and OMIG guidance.

Annually, the Compliance Office will conduct a comprehensive Risk Assessment and Internal review to identify and address risks associated with Nuvance Health's participation in Federal health care programs, including but not limited to the risks associated with the submission of claims for items and services furnished to Medicare and Medicaid program beneficiaries.

### ***Compliance and Internal Audits***

Compliance Office audits are conducted in a systematic and structured approach. This formal process is performed by individuals who are independent of the department being audited. The process involves identifying a risk area; determining the key objectives; detailing the scope and methodology to be utilized; selecting a sample; researching applicable regulatory guidelines; and producing a written report of findings, recommendations, and management responses to those findings and recommendations. Audits require agreement to the appropriateness of the management response by designated management.

### ***Compliance Reviews***

Compliance Reviews involve determining compliance with a departmental process/policy or government regulation and may be performed as follow-up to an audit. This can include small random claims reviews, the review of compliance monitoring activities, management or Workforce Members interviews, and policy and procedure reviews. The Compliance Review results in a written communication of findings and recommendations to management and real time management responses.

### ***Compliance Monitoring***

The process of monitoring is typically performed by operational department Workforce Members, though the Compliance Office is available to provide guidance and support to such efforts. Monitoring involves daily, weekly, or other periodic spot checks to verify that essential functions are being adequately performed and that processes are working effectively. Monitoring may be conducted subsequent to an audit or review. Departments performing their own monitoring may be asked to share their findings with the Compliance Office.

### ***Corrective Action and Discipline Following Internal Compliance Audits***

In response to audits, reviews or investigations that have identified issues of non-compliance, a corrective action plan may be required. Corrective actions may include, but are not limited to, the following:

- Informing and discussing with relevant Workforce Members both the violation and how it should be avoided in the immediate future;

- Suspending all billing of the services provided by a physician or provider, as necessary;
- Providing formal training and education to ensure that they understand the applicable rules and regulations;
- Conducting routine monitoring to ensure that the problem is not recurring;
- Refunding any past payments that resulted from improper bills and when applicable, voluntarily disclosing to an appropriate governmental agency;
- Imposing discipline, as necessary, consistent with Office policy.

### ***Reporting Corrective Actions***

The CCAPO presents corrective action plans developed to the members of the ECC on a regular basis. The CCAPO should discuss any barriers identified in fulfilling the actions outlined in the plan to ensure proper support from Executive Leadership to address the barriers.

## **Element VII - Procedures and System for Prompt Response to Detected Offenses**

### ***Investigation of Potential Offenses***

Violations of policies, procedures and standards of conduct have the potential to threaten Nuvance Health's status as a reliable, honest and trustworthy amongst the Federal healthcare programs and to the community which it services. Upon notice of potential non-compliance, the CCAPO will initiate an investigation into the reported concern. The objective of such an inquiry will be to determine first whether a non-compliant issue exists or if there has been a violation of the Code of Conduct or applicable policies or legal rules. If an issue or violation does exist, the inquiry will attempt to determine its cause, so that appropriate and effective corrective action can be instituted. The investigation will be initiated as quickly as possible.

Nuvance Health will pay particular attention to instances of potential Overpayments. All identified or reported potential Overpayments will be immediately investigated. Overpayments will be repaid consistent with established Nuvance Health policies and procedures and regulatory requirements.

### ***Remedy of Harm***

Corrective or disciplinary action to immediately cease all current and future violations will be taken as appropriate following a thorough investigation. The CCAPO will take reasonable steps, as warranted under the circumstances, to remedy harm that may have resulted from inappropriate or criminal conduct. This may include, where appropriate, providing restitution to identifiable victims, offer forms or remediation and self-reporting and cooperation with governmental authorities. Further, in consideration of the nature of the event, Nuvance Health should assess the Compliance Program and make modifications necessary to ensure the program is effective in preventing further similar criminal conduct.

### ***Ineligible Persons***

Nuvance Health conducts screening against Federal and State Exclusion Lists including the OIG List of Excluded Individuals/Entities upon hire of new Workforce Members or at initiation

of a business relationship with vendors, and monthly, to ensure that any Workforce Member, Board Member, provider or vendor has not been excluded from participation in any Federal health care program nor has been convicted of a criminal offense. If it is discovered that an individual or entity has become ineligible, Nuvance Health will immediately remove them from any position for which compensation or items or services furnished, ordered, or prescribed by the individual or entity, are paid in whole or in part by a Federal health care program.

Further, Workforce Members and vendors have an obligation to disclose to Nuvance Health immediately if they become an Ineligible Individual or Entity.

## **V. Other Focus Areas of Compliance**

Below are listed issues of concern and appropriate standards applicable to each area of concern.

### ***Claims Development and Submission***

Nuvance Health has an obligation to their patients, third party payors, and the Federal and State governments to exercise diligence, care and integrity when submitting claims for payment for services rendered. To uphold this obligation, Nuvance Health shall maintain honest, fair, and accurate billing practices. All individuals involved in the billing functions, including physicians, shall have experience and knowledge, and billing personnel shall be appropriately trained to perform all billing functions in accordance with Federal, State, and local law.

### ***Documentation***

In addition to facilitating high quality patient care, Nuvance Health shall maintain a properly documented medical record that precisely documents what services were actually provided. The medical record may also be used to validate: (a) the site of the service; (b) the appropriateness of the services provided; (c) the accuracy of the billing; and (d) the identity of the care giver.

### ***Medical Necessity: Reasonable and Necessary Services***

Nuvance Health shall ensure that claims are submitted to a payor only for services that are medically necessary and that were ordered by a physician or other appropriately licensed and credentialed individual. Upon request, Nuvance Health should be able to provide documentation to support the medical necessity of a service (or recertification) that was provided. If the patient requests or consents to a service that is not covered by insurance, the patient would be informed the service is not covered prior to the furnishing of such service.

### ***Financial Accounting Records: Integrity and Accuracy***

All financial reports, accounting records, research reports, expense accounts, time sheets, and other financial documents shall accurately represent the performance of operations. Workforce Members shall be trained, and their work shall be monitored to assure proper maintenance of information to comply with Nuvance Health's policy, accreditation standards, and any other such laws, statutes, or regulations.

### ***Retention of Records***

All billing records that demonstrate Nuvance Health's right to receive payment from third-party payors, and all medical and other records that disclose the nature and extent of services furnished and the medical necessity for those services, will be retained in accordance with applicable Federal and State law but in no event shall such records be retained for a period of less than six (6) years. (Refer to the "Document Retention and Destruction Policy" and the "Record Retention and Destruction" Policy and Procedure on *Ellucid*.)

### ***Compliance with Licensure and Competency Requirements***

All physicians and other providers employed by Nuvance Health must be properly licensed pursuant to applicable state requirements, and Nuvance Health will take steps on a regular basis to ensure compliance and basic competency. Nuvance Health will not submit any bill to a third-party payor for services provided by a physician or other provider who is not properly licensed.

### ***Gifts, Payments, Loans and Entertainment***

It is the policy of Nuvance Health and its Affiliates to maintain the highest standards of ethical conduct in its relationships with patients, visitors, suppliers and other agencies, firms, and individuals with whom Nuvance Health has dealings. The solicitation of gifts, gratuities, favors or kickbacks by a Workforce Member is also prohibited. (Refer to the "Gifts and Business Courtesies From Vendors Policy", "Patient Gifts Policy", and "Gifts and Business Courtesies" Policy and Procedure on *Ellucid*).

### ***Standards Relating to Confidentiality***

Workforce Members are expected to treat confidential information obtained through their employment or service to Nuvance Health with the utmost confidentiality. Information learned about a patient's medical treatment or condition is considered confidential as a matter of law and should be treated with particular care. Various State and Federal laws and regulations further protect certain types of information about a patient, in particular, the Privacy, Security, and Breach Notification Rules under the implementing regulations of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"). It is essential, therefore, that Workforce Members adhere to all applicable laws regarding the confidential and privileged status of medical records and communications. This information should be shared within Nuvance Health only as appropriate to ensure the optimum patient care and as provided in established policies regarding matters such as medical records, quality assurance, risk management, utilization review, administration, human studies and research. (Refer to the HIPAA Privacy and Security Policies on *Ellucid*)

### ***Conflict of Interest***

Nuvance Health recognizes that Workforce Members associated with Nuvance Health have varied professional, financial, and personal interests. Nuvance Health expects that these interests and commitments will be managed in a manner that does not harm Nuvance Health operations or reputation. A conflict of interest may exist in a variety of situations, including whenever a Workforce Member has an opportunity to use his or her position at Nuvance Health for personal gain or the gain of a family member or a friend; or when a person or group not



associated with Nuvance Health might influence the work decisions of Workforce Members. A conflict of commitment exists when outside consulting or other relationships keep an individual from devoting appropriate amounts of time, energy, creativity, or other personal resources to his or her Nuvance Health responsibilities. (Refer to the “Conflict of Interest Policy” and the “Conflict of Interest, Confidentiality and Certification for Management – WCHN” Policy on *Ellucid*)

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