

**Home Aides of Central New York, Inc.
723 James Street
Syracuse, NY 13203
315 476-4295**

Corporate Compliance Program

I. Code of Conduct

Home Aides of Central New York (the agency) expects its employees to refrain from any conduct that may violate the fraud and abuse laws. These laws prohibit the submission of false or fraudulent or misleading claims to any government entity, third party payer, or client, including

- submission of false or fraudulent or misleading claims, including claims for services not rendered, claims which characterize the service differently than the service actually rendered, or claims which do not comply with program or contract requirements;
- making false representations to any person or entity in order to gain or retain participation in a program or obtain payment for any service.

II. Internal Control

The agency has established internal control standards and procedures to ensure that the assets of the agency are protected and properly used and that financial reports are accurate and reliable. All employees are expected to maintain and comply with the required internal control standards and procedures.

III. Financial Reporting

All financial reports, accounting records, reports, expense accounts, time sheets and other documents must accurately and clearly represent the relevant facts or the true nature of the transaction. Improper or fraudulent accounting, documentation or financial reporting is contrary to the policy of the agency and may be in violation of Federal and state laws.

IV. Personal Use of Agency Assets

All employees are expected to use agency resources, including human resources, for agency business only. All property of the agency and business of the agency will be conducted in the manner designed to further the agency's interests rather than the personal interests of employees. Employees are prohibited from the unauthorized use of the agency's equipment, supplies, materials or services.

V. Medicaid Fraud and Abuse Compliance Policy

It is the policy of Home Aides of Central New York to comply with all laws and regulations pertaining to the delivery of and billing for services which apply to the agency on account of its participation in Medicaid and other government programs.

A. Compliance Standards and Guidelines

The agency will develop compliance standards and guidelines and distribute them to affected employees of the agency. These will be reviewed and updated at least annually. These standards and guidelines will enhance the ability of employees to perform their

responsibilities in accordance with the agency's compliance policy and applicable laws and regulations. Affected employees will be trained in the standards and guidelines pertaining to their employment responsibilities.

The agency will have compliance standards and guidelines pertaining to:

1. billings and payments
2. clinical personnel licensure and certification
3. clinical documentation
4. time reporting

The agency will conduct the following activities to monitor compliance with the agency's standards and guidelines and to detect non-compliance:

1. Conduct and document employee education and training in the compliance standards and guidelines.
2. Conduct periodic internal audits and external audits designed to evaluate potential or actual non-compliance.
3. Investigate any reports of non-compliance.
4. Discipline employees, in accordance with the agency's disciplinary policies and procedures, for failure to meet their obligations relating to the compliance program, encouraging, directing, facilitating or permitting either actively or passively non-compliant behavior, or failure to report suspected violations of the compliance program.
5. Report potential criminal activities to outside enforcement agencies as deemed appropriate.

B. Employee Reporting and Non-Retaliation Policy

It is the responsibility of every employee of the agency to abide by applicable laws and regulations and support the agency's compliance efforts.

All employees are required to report their good faith belief of any violation of the agency's policies, procedures, compliance program or applicable law. Failure to report suspected violations are subject to discipline up to, and including, discharge.

The agency, at the request of the reporting employee, will maintain the confidentiality of the reporting employee to the extent possible, consistent with its obligations to investigate the employee's concerns and take appropriate corrective action.

Employees may report violations of the policies, procedures, compliance program or applicable laws, or their good faith belief of such violations: 1) either orally or in writing to their department manager or supervisor; and/or 2) either orally or in writing to the President of the agency; and/or 3) calling the President of the agency at 315-476-4295; and/or 4) by mailing their written concern to the President of the agency at the agency's address (723 James Street, Syracuse, NY 13203) and marking the envelope confidential. Suspected violations by the President may be reported to the Chair of the Board of Directors whose address and phone number are available from the Office Manager by calling 315-476-4295. The Chair of the Board of Directors shall bring the complaint to the agency's Executive and

Finance Committee, which shall serve as the agency's Compliance Committee for the purpose of monitoring the implementation this policy.

Anonymous reporting is available but the agency will be unable to provide feedback if anonymous reports are made.

The agency wishes to promote open discussion by its employees of its business and clinical practices. To this end, there will not be retaliation in the terms and conditions of employment as a result of an employee's good faith reporting of a violation or suspected violation. Any manager, supervisor or other employee who commits or condones any form of retaliation will be subject to discipline up to, and including, discharge. Additional information regarding the agency's non-retaliation and whistle-blower policy can be found in the agency's personnel policy manual.

C. Responsible Officer

The agency has designated the President as its chief compliance officer (CCO) responsible for the overall implementation and operation of the compliance program. The CCO will be responsible for ensuring that:

1. Compliance standards and guidelines are reviewed and updated as necessary, but at least annually.
2. Employees are receiving adequate compliance education and training and that such education and training is documented.
3. Compliance procedures are implemented in accordance with the agency's policies.
4. Employee complaints and other concerns regarding compliance are promptly investigated.
5. Adequate steps are taken to correct any identified compliance problems and prevent the reoccurrence of such problems.
6. The President is informed of any compliance violations and the steps being taken to remedy them.
7. The CCO will report on the status of the compliance program and any related allegations and their disposition to the President and the Compliance Committee.

D. Report to the Board

1. The Executive and Finance Committee of the Board of Directors shall serve as the Compliance Committee for the purpose of monitoring the implementation of this policy.
2. The President will present the Compliance Policy to the Compliance Committee of the Board for its approval.
3. The CCO will report on the status of the compliance program and any related allegations and their disposition to the President and the Compliance Committee at least semi-annually.