Code of Conduct





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A Message from the President

I am committed to preventing and detecting any fraud, waste, or abuse in ArchCare and ensuring that our processes comply

with applicable law and regulations. This Code of Conduct is meant to provide a foundation of shared ethical expectations of how we conduct ourselves in carrying out our mission. Compliance is everyone's responsibility from the "top" to the "bottom" of the organization. Our Code applies not only to our employees, but to our contractors and agents, our volunteers, our trustees, our affiliated medical staff, and our vendors and subcontractors.

Your commitment will greatly benefit ArchCare and the community we are privileged to serve.

Thank you for your efforts,

Scott LaRue President and CEO



A Message from the Chief Compliance Officer

Here at ArchCare, we are wholly dedicated to doing the right thing—not just delivering services of high quality, but doing so in a legal and ethical way. To help ensure that everyone acts in accordance with this high standard, our team of compliance officers and I are here to help.

First, I encourage you to read this Code of Conduct carefully. Ethical standards and health care regulations are very complex. Second, if you have any questions or concerns, please let us know. It is my responsibility to ensure that your questions are fully addressed and that your complaints are properly investigated.

Thank you so much for doing your part to maintain the integrity with which we carry out our mission. Your efforts mean a lot to our organization.

Sincerely,

Sarah D. Strum
Chief Compliance Officer

Our Mission

The mission of ArchCare is to foster and provide faith-based holistic care to frail and vulnerable people unable to fully care for themselves. Through shared commitments, ArchCare seeks to improve the quality of the lives of those individuals and their families.

ArchCare Principles of Operations

Justice: We live and work as members of a community, and all members of our community have rights that are coupled with responsibilities.

Inclusiveness: While we are unified as one community, each of us is valued for our unique heritage and defined only by our eagerness to contribute to the best of our abilities.

Respect: Each of us is as important as any other - whether resident, family, friend, volunteer or employee - and we must respect each other if we are to receive respect.

Integrity: To be a truly caring community, we must speak and act with total honesty, without concern for the consequences of our truthfulness.

Benevolence: We recognize that those with the greatest needs often have the least resources, and we will provide the same care to the disenfranchised that we do to those who have been more fortunate.

Humility: While subscribing to high ideals, we will recognize our individual and collective limits. Only then can we continue to grow towards who and what we so earnestly strive to be.

Spirituality: While we take pride in following the traditions of the Roman Catholic Church, we seek to serve people of all beliefs equally and to fulfill each individual's spiritual needs by respecting their distinct beliefs.

About our Compliance Program

The goal of the ArchCare Compliance Program is to promote a culture of commitment to the prevention, detection, and resolution of situations that may not conform to applicable laws, rules, and regulations. Integrity, justice, and respect are three of the core guiding principles of this organization, and the Compliance Program is in place to keep these values integrated with our everyday work.

Who to Contact on the Compliance Team

Chief Compliance Officer Sarah Strum | 646-633-4401

ArchCare Advantage Compliance Officer Elizabeth McCosker | 917-484-9735

ArchCare Community Life Compliance Officer Sheila Tagle | 646-292-3049

ArchCare Senior Life Compliance Officer Wendy Brizer-Maciol | 646-289-7715

ArchCare at Home Compliance Officer Regina Tancredi | 914-810-2654

Family Home Health Care Compliance Officer Tami Siedler | 914-810-2601

ArchCare at Carmel Richmond Healthcare and Rehabilitation Center Compliance Liaison
Barbara Sylvester | 718-668-8530

ArchCare at Ferncliff Nursing Home Compliance Liaison Dorice Tokarz | 845-516-1671



ArchCare's non-retaliation policy protects those who contact us with reports or concerns See pg. 27 for details.

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Who to Contact on the Compliance Team

ArchCare at Mary Manning Walsh Home Compliance Liaison

Daisy Lope | 212-628-2800

ArchCare at San Vicente de Paúl Skilled Nursing and Rehabilitation Center Compliance Liaison

Maureen Boothby | 917-645-9205

ArchCare at Terence Cardinal Cooke Health Care Center Compliance Liaison

Vickey Johnson | 212-360-3604

Compliance & Corporate Ethics Hotline

800-443-0463

Email Reports compliancereport@archcare.org

ArchCare Intranet Resources



ArchCare's non-retaliation policy protects those who contact us with reports or concerns See pg. 27 for details.

Understanding our Code of Conduct

As a member of the ArchCare team, your first task is to understand our ethical expectations by reading our Code of Conduct. The Code is a guide and resource to help you make good and ethical choices as you perform your duties at ArchCare. It is your responsibility to be aware of all the rules in the Code—whether they all apply to you or not—so that you are sensitive to situations you may encounter that involve any given rule. In many instances, the Code fully explains the subject covered. In others, the Code presents a summary of the rule, but further details can usually be found in a policy and procedure elsewhere. If you have any further questions, please do not hesitate to contact the appropriate expert on our Compliance team. We will always be happy to help.

In addition to understanding the Code of Conduct, everyone is expected to understand the federal, state, and local law, rules, and regulations applicable to his/her area of work. This includes the rules of Medicare and Medicaid and those of other local, state, and federal programs.

Violations of the Code, law, or our policies may result in serious consequences, such as oral or written warnings or reprimands, suspensions, terminations, financial penalties, and potential reporting of the conduct to law enforcement.

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Our Relationship with those we Serve

Providing Excellent Care and Service and Respecting Patient Rights

We are committed to providing excellent care and service at all times:

- regardless of where we work—
 whether we work for a nursing home,
 a health plan, a clinic, or another type
 of provider or plan;
- regardless of whom we are serving whether it be patients, residents, consumers, or members;

We provide each patient equal, high quality care

regardless of his or her:

- race, color, or national origin
- sex or sexual orientation
- creed or religion
- marital status, age, or veteran
- disability or English proficiency
- source of payment or ability to pay

"We are committed to providing excellent

care and service at all times."

To ensure that each patient receives quality care, we base all clinical decisions solely on his/her identified health care needs, regardless of how ArchCare compensates or shares financial risk with any individual or entity. We provide each patient with nothing but the appropriate and necessary care based on our assessment of his/her health care needs. Additionally, we conform to all applicable state and federal laws about treatment.

ArchCare extends the same high quality care to individuals with disabilities and individuals with limited English proficiency (people who have limited ability to read, write, speak, or understand English). In compliance with Title III of the Americans with Disabilities Act and Section 1557 of the Affordable Care Act, we provide services to these individuals in a very accessible and meaningful way. For individuals with disabilities, we provide full and equal access to their health care services and facilities, and make reasonable modifications to policies, practices, and procedures when necessary to make health care services fully available. This is unless such modifications alter the essential nature of these services. For individuals with limited English proficiency, we take reasonable steps to make them comfortable and help them understand the services in our health programs. Our ultimate goal is to serve these individuals in the best way possible.



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Keeping Patient Information Secure and Private

Our role requires us to collect and maintain the personal health information (PHI) of those we serve. This data is protected under federal and state privacy and security laws.

We:

- In all cases, use and disclose only the minimum necessary PHI to perform the job;
- Disclose PHI to a third party only with written authorization
 - from the individual, unless the law authorizes or requires the disclosure, such as disclosure to another provider for treatment;
- Dispose of unneeded documents containing PHI in the provided receptacle;
- Never leave PHI lying on desks, active on computers, in fax machines, or in any other generally accessible area; and
- ❖ Keep electronically held health information secure in compliance with the HIPAA Security Rule.

Examples of PHI include...

- names
- · dates of birth
- social security numbers that are combined with medical information such as diagnoses and physician notations.

This data is to be handled in a confidential manner.

Preserving Patient Choice

At ArchCare, we believe our patients have the right to make decisions on their medical care, and we always respect that right. We do our best to fully explain the options available to them and honor the selections that they make thereafter. Additionally, ArchCare also honors individuals' advance directives within the limits of the law and the mission of ArchCare. We uphold the Ethical and Religious Directives for Catholic Health Care Services.

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Q&A:

Q: Our patient does not seem to like our medical advice. I want to respect the patient's right to choose for himself, but I also strongly feel that our suggested course of action is best for him. What should I do?

A: We understand your desire to care for your patient as best as possible, but ultimately, your patient has the final say on how he is to be cared for. You can, and are strongly encouraged to, inform and educate your patient on all available options and their pros and cons. However, unless his requests go against the Ethical and Religious Directives, the final decision is *his* to make, not yours.

Q: My patient's son wants a certain procedure to be done for his mother. However, the mother herself has not yet expressed any desire for this service. Am I allowed to carry it out according to her son's request?

A: No, not yet at least. As long as the patient is capable of making her own decisions, your responsibility is to listen to *her*. Even if the son's request is sound and can benefit his mother's health, you may only administer care as requested by the patient herself

Our Relationship with Physicians and other Health Care Providers

We Do Not Pay for Referrals

We accept referrals and admissions solely based on the individual's needs and our ability to render the needed services. We do not pay or offer to pay anyone – explicitly or implicitly – for referrals of patients.

We Do Not Accept Payments for Referrals that we Make

In the same way, we make patient referrals solely based on the patient's clinical needs and the abilities of the referred provider to render such services. We may never solicit or receive anything of value, directly or indirectly, in exchange for the referral of patients. Similarly, when making patient referrals to another health care provider, we do not take into account the volume or value of referrals that the provider has made (or may make) to an ArchCare entity.



Our Business Relationships and Practices

Our Relationships with Vendors and Suppliers

At ArchCare, we strongly value good, proper relationships with our partner vendors, subcontractors, and suppliers. As such, we always employ the highest ethical standards in those relationships with respect to source selection, negotiation, determination of contract awards, and administration of purchasing activities. Vendors, subcontractors, and suppliers are selected based on objective criteria and objective criteria only.

We select vendors, subcontractors, and suppliers based on

- ✓ Quality
- ✓ Service
- ✓ Price
- ✓ Delivery capability

 Not based on

personal relationships

Anti-Kickback and Anti-Referral Statutes

ArchCare complies with federal and state anti-kickback laws and regulations. These laws say that we cannot give or receive anything of value—cash, entertainment, credits, gifts, goods, services, forgiveness of debt, or the sale or purchase of items at a price lower than fair market value—that is intended to encourage the purchasing, leasing, or ordering of an item or service that may be reimbursed under a government health care program, such as Medicare or Medicaid.

We do not routinely waive co-insurance or co-payments.

Q&A:

Q: I am trying to refer a patient to a suitable provider, but that provider is refusing his admission because he has too complicated a medical history. However, the provider mentioned that in exchange for a little extra, they can admit him and see what they could do. Should we follow through with the referral?

A: No. In this case, the "little extra" is considered something of value intended to encourage his admission. This is not allowed according to Anti-Kickback laws.

Q: I am working with ArchCare's MLTC plan, and we are currently trying to contract with a Licensed Home Care Service Agency. In discussing the deal that we are planning to make with them, some of my colleagues suggested offering the contract on the condition that this agency also refer a certain number of clients to our MLTC plan on a yearly basis. I think this could help us get a lot more admissions to our plan. Can we go through with it?

A: No, such a deal is not acceptable. Offering the contract on this condition is another way of incentivizing referrals to our services, which is prohibited by the Anti-Kickback laws. It is your responsibility to speak up in compliance with the law.

Q: A man heard about our MLTC plan from his home health aide. He wants to sign up with our plan and wishes to add home health care as a service in his plan of care. Since he has been using the service for a while, I am assuming he qualifies for the plan. Can I enroll him based on these assumptions?

A: No, not based on such assumptions. You must first make a full assessment of his medical needs. Because our services and plans are reimbursed through Medicaid, we are only allowed to enroll and admit people based on our assessment of their clinical needs. If you identify that he really needs the services he is requesting, then you can enroll him. Otherwise, you should not enroll him based on these assumptions.

Gifts and Business Courtesies

Because our services greatly impact the lives of those we care for, patients and family members at times want to show their appreciation in the form of a gift. However, no one working for ArchCare may give or receive anything of value to or from a patient or family member. Instead, grateful patients and families may donate to the Catholic Health Care Foundation, give donations in honor of a staff member, send gifts like flowers or fresh fruit baskets to a unit, or write letters of thanks and appreciation.

In a similar way, no one working for ArchCare may give or receive anything of more than nominal value* to or from referral sources. individuals, or other entities with whom ArchCare has a potential or actual business relationship (unless it is done through fundraising undertaken in accordance with ArchCare's fundraising policies). Certain business courtesies, however, are allowed: ArchCare permits its workforce and contractors to accept or provide invitations to attend a social event with a business colleague in order to further develop business relationships or take advantage of educational opportunities, as long as it does not exceed nominal value*. For further detail, please consult your Compliance Officer

We may NOT

- give or receive anything of value to or from patients and their families
- give or receive anything of greater than nominal value* to or from actual or potential business partners of ArchCare.

- (1) \$50 for a single gift
- (2) \$100 for gifts acquired from a single person/entity over a year, or
- (3) \$200 from a single person/entity to several employees for a single social event or meal.

^{*}Nominal value is defined as:

Conflicts of Interest

A conflict of interest may arise if your outside activities or personal interests influence or appear to influence your ability to make objective decisions in doing your job. Alternatively, a conflict of interest may arise if the demands of your outside activities hinder or distract you from performing your job.

In order to avoid even the appearance of a conflict of interest, each management employee and trustee must disclose any ownership or financial interests that they or members of their immediate family have in an entity that does business with ArchCare or one of its affiliated entities. At the time of hire and annually thereafter, each management employee must execute an attestation that he/she has reviewed the organization's conflict of interest policy and has disclosed any potential conflict of interests. If there are or were any conflicts, he/she must also state whether he/she has eliminated the conflict, or whether he/she has obtained management approval to work despite the conflict(s).

Q&A:

Q: My family owns a construction business. I am a business partner but not an executive administrator.

Currently, I am also an assistant administrator at a nursing home that is looking to contract a construction company for a new building project. I have written down my family's business for the bid. Do I have to disclose my personal ties to the business even if I do not play a direct role as executive administrator?

A: Yes. As a business partner, you have financial interest in your family's business, which can cause a conflict of interest. You must disclose this to the rest of your team at the nursing home and your Compliance Officer.

Q: What should I do if a conflict of interest arises in between the annual disclosures and attestations?

A: Inform your compliance officer as soon as you can. He/She may ask you to submit a new attestation form.

The Integrity of Our Business Information and Information Systems

Financial Reporting and Records

We must properly account for our assets and liabilities and comply with tax and financial reporting requirements. Our books and records must reflect actual transactions accurately and completely and may not omit any material information. Additionally, they should conform to generally accepted accounting principles.

It is strictly prohibited

- > to establish an unrecorded corporate account
- > to use any account to mislead or conceal a corporate resource
- > to falsify, alter, or tamper with financial records.

Payments to third parties must be supported by adequate documentation, made by checks issued by the finance department and promptly and properly recorded on our books.

Accuracy, Retention and Disposal of Books and Records

Because our medical and business records serve as a basis for patient treatment decisions and billing of government programs, it is important that they are accurately completed and maintained. Only authorized individuals may make changes to medical records in accordance with our policies. Medical and business documents and records are retained in accordance with the appropriate laws and our Record Retention Policy. Records include paper copies as well as electronic files. Records must not be destroyed prior to the date specified in the relevant retention schedule.

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Coding and Billing for Services, Payments for Services

Federal and state false claims acts and similar laws prohibit submitting a false claim or making a false record or statement in order to gain reimbursement from, and/or avoid an obligation to a government-sponsored program, such as Medicare or Medicaid. We strictly adhere to all applicable laws, regulations and program requirements when billing federal or state health care programs. We provide our employees with information regarding the federal and state false claims acts, whistleblower protections, and our process for preventing fraud, waste, and abuse.

We do not:

- ➤ Bill for items and services not rendered or not medically necessary
- ➤ Misrepresent the type or level of service rendered
- ➤ Bill for non-covered services
- Misrepresent a diagnosis in order to obtain payment

If we discover that we were overpaid by a state or federal program, we return the overpayment within the timeframe and process required by the state and federal governments.

Detailed information about state and federal statutes relating to filing false claims as well as information about whistleblower protection available under state and federal law is available to our employees during orientation and to our contractors and vendors on our website www.archcare.org

Accuracy of Cost Reports

A substantial portion of our business involves reimbursement under state and federal government programs that require the submission of cost reports. For this reason, we must adhere to a wide range of legal and regulatory requirements in the preparation of such cost reports. These requirements define the appropriate methodology to claim reimbursement as well as the allowability of costs.

Ineligible Health Care Providers, Vendors or Suppliers

Sometimes, the government finds that certain individuals and/or entities have engaged in abuse or fraud. As a result these individuals and entities are excluded from participation in Medicare, Medicaid, and other federal and state health care programs. ArchCare heeds the government's decisions, and therefore does not employ, contract, or affiliate with any individual or entity that has been excluded from any government-funded program in this way.



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Our Workplace Conduct

Non-Discrimination, Non-Harassment

ArchCare is committed to treating all people fairly and equally, without any regard to race, creed, color, religion, age, sex, sexual orientation, disability, citizenship, veteran status, marital status, or national origin.

For one, ArchCare never discriminates and always provides equal opportunity to all people and adheres to actions and policies that assure fair employment. This standard of fairness is applied to hiring, promotion, training, compensation, termination, disciplinary action, etc.

Additionally, we work hard to make sure our work environment is one in which each and every person is treated with fairness, respect, and dignity. As such, ArchCare has zero tolerance of harassment of any sort.

ArchCare prohibits:

- any and all harassment
- toleration of harassment of others
- retaliation against anyone for reporting harassing behavior

What is Discrimination?

Discrimination is the practice of unfairly treating a person or group of people differently from others based categorical differences.

What is Harassment?

Harassment is any conduct that shows hostility or aversion toward an individual based on categorical differences and that:

(1) creates an intimidating, hostile, or offensive work environment; (2) unreasonably interferes with an individual's work performance; and (3) otherwise adversely affects an individual's employment.

ArchCare has <u>zero</u> tolerance of discrimination or harassment of any sort.

No one may ever discriminate or harass based on race, creed, color, religion, age, sex, sexual orientation, disability, citizenship, veteran status, marital status, or national origin.

Disruptive Behavior

Disruptive behavior is a negative style of interaction with employees, affiliated medical or clinical staff, family members, patients, or others. It interferes with patient care, tends to cause distress among staff, affects morale, and harms the work environment. Examples of unacceptable disruptive behavior are raised voices, angry outbursts, throwing objects, verbal abuse, abusive treatment of patients, families, or staff, disruption of meetings, willful disobedience, and refusal to carry out tasks. ArchCare will not tolerate individuals engaging in disruptive behavior or threatening to engage in workplace violence.

Disruptive behavior includes:

- raised voices
- angry outbursts
- throwing objects
- · verbal abuse
- abusive treatment of patients, families, or staff
- · disruption of meetings
- willful disobedience
- refusal to carry out tasks
 Disruptive behavior is
 not acceptable in our
 workspaces.

Employees with Disabilities

ArchCare complies with all applicable laws and regulations governing employment of individuals with physical and mental disabilities. No one shall discriminate against any individual with a disability with respect to any offer, term, or condition of employment. We make reasonable accommodations to the known physical and mental disabilities of otherwise qualified individuals.

Substance and Alcohol Abuse

We are committed to providing an alcohol-free and drug-free work environment. The unauthorized use, possession, sale, exchange, or purchase of alcohol, drugs, or other illegal substances on ArchCare premises or when representing ArchCare is strictly prohibited.

Health and Safety

Maintaining a healthful and safe workplace is very important to us at ArchCare. We comply with the federal, state, and local laws, rules and regulations that promote health and safety.

Proper Use of Corporate Assets

We are all responsible for preserving company assets, including time, materials, supplies, equipment, and information. Company assets are to be used for business-related purposes only. However, occasional use of items like copying facilities or telephones, where the cost to ArchCare is insignificant, is permitted.

Political Activities and Contributions

ArchCare is prohibited by federal law from using company time or resources to support political activities. This includes contributing funds or resources to political candidates or officeholders, and reimbursing employees for their personal contributions to political campaigns.



Reporting Our Concerns

Our Obligation to Report Violations

If you have reason to believe that someone acting on ArchCare's behalf has violated this Code or has committed an act of fraud, waste, or abuse, it is your duty to report the violation.

You may ask a question or report a concern or violation by:

- talking to the Compliance Officer at your site
- contacting the Chief Compliance Officer of ArchCare at 646-633-4401
- calling the Compliance & Corporate Ethics hotline at 800-443-0463
- emailing us at <u>compliancereport@archcare.org</u>

Q&A:

Q: Can I report to the Compliance Office anonymously?

A: Yes. If you call the Compliance & Corporate Ethics hotline, you can remain anonymous if you wish. You will receive a case number with which you can call back periodically to follow up on the status of the report's investigation.

How Compliance Issues are Investigated and Resolved

ArchCare investigates all good faith reports of wrongdoing. If you are asked to participate in an internal investigation of misconduct or unethical behavior, you are required to cooperate. To adequately review an allegation, investigations can sometimes be lengthy. Therefore, we ask that you please be patient if you do not get an immediate response concerning your report.

Q&A:

Q: I have observed what I think may be a violation of our Code of Conduct. However, I do not have that many details nor am sure that the situation is actually a problem. Should I contact the Compliance Office anyway?
A: Yes. You do not have to know about the entire situation in order to talk to us about your concerns. The compliance officers are here to address your concerns and to serve as a source of information for you as well. As long as you report and share information in good faith, your contribution to the organization's compliance is greatly appreciated. With your report and our further investigation, we can determine whether or not the case is truly problematic. It is better to report a situation that is not really an issue, than it is to ignore a compliance violation for lack of better understanding.

Our Non-Retaliation Policy

ArchCare strictly prohibits retaliation, discrimination, harassment, or any other adverse action taken against an employee who, in good faith, reports or participates in the investigation audit, remedial action, or self-evaluation of a potential ethical or legal violation. However, despite reporting or investigating a potential compliance issue, you will still remain subject to disciplinary actions for your own improper acts.

Q&A:

Q: I believe my supervisor is accepting bribes. I want to report it, but I fear that he will retaliate against me. What should I do?

A: Reporting against your superiors can be intimidating, but we ask that you remain faithful to your obligation to report. We will do our part to make sure you are not punished for your good deed. We promise to keep your identity confidential as much as is feasible, and, in the event of retaliation, we assure you that we would take the proper steps to ensure justice is delivered in such a situation.

Q: If a colleague makes a report against me, but I soon find that he does something in violation of the Code as well, can I still safely make a report without it being labeled as an act of retaliation?

A: Yes. If you are honest in your motives, then such a report is not an act of retaliation. As in all cases, you are obligated to report such a potential violation using one of our lines of contact, and we will do our best to fully investigate the whole story—the reports and potential retaliations—and serve justice as we deem deserved.

Notes:



