

Summary of the Corporate Compliance Program Policies

Introduction:

The full policies on HIPAA Privacy, Compliance, Code of Conduct, and Deficit Reduction Act can be found on ECC's website at www.extendedcarellc.com.

This facility has a goal to provide services to its residents to promote the highest quality of life. At the same time, the facility wishes to follow all federal, state and local laws. A compliance program and code of conduct will provide a system and an approach which will make sure all goals, quality services, and following laws are met. This program is facility and business-wide; everyone plays a role, nurses, CNAs, billers, dietary, social services, everyone. This program is designed to focus on how employees can successfully meet the needs of the facility's many customers while making sure we are all following federal and state guidelines.

The most important parts of the Facility's goal (quality care) are based on two behaviors: honesty and duty. As an employee of the facility, if you conduct yourself with honesty, complete your job duties and treat each other and the residents with respect and dignity, you are well on your way to meeting the goal of the compliance program.

The Office of Inspector General (OIG) of Health and Human Services Department has outlined specific risk areas for all nursing facilities. We have made these risk areas the first part of the compliance program. Those risk areas are:

1. Quality of Care
2. Resident Rights
3. Employee Screening
4. Vendor (outside companies) Relations
5. Billing and Cost Reporting
6. Kickbacks, inducements, bribes and self-referrals
7. Record Keeping and Documentation

Read more about the risk areas later.

Additionally, we have added to this list a policy to analyze the results of annual surveys and compliant investigations done by the state department of public health. This review will be conducted to verify that the facility has effectively addressed any deficiencies cited by the surveyors.

Compliance Policies and Procedures

It is the policy of this facility to always and fully follow all regulations with delivery of and billing for services. These regulations come from participation in Medicare, Medicaid and other governmental programs. The facility expects each employee to follow the standards described here.

The program meets and exceeds the elements of an effective compliance program, which require an organization to do the following:

1. Create standards and procedures reasonably capable of reducing the probability of poor care;
2. Appoint specific managerial-level individuals with overall responsibility to oversee compliance with such standards and procedures;
3. Provide steps to communicate effectively these standards and procedures to all employees and agents by, for example training sessions and or distribution of publications;
4. Provide reasonable steps to achieve compliance by using monitoring and audit systems;
5. Provide a reporting system whereby employees and agents can report what they believe may be wrongful conduct by others within the facility without fear of retribution;
6. Provide consistent enforcement of its standards through appropriate disciplinary mechanisms, and;
7. Provide responsible steps to respond appropriately to non-compliance after detection including the prevention of recurrence, which may require modifications to the program.

The facility has a designated Compliance Committee which includes but not limited to, the following representatives:

The facility Administrator or Executive Director (Corporate Compliance Liaison)
The Director of Nursing, Social Services Dir., PRSD or LPHA
The Director of Admissions, The MDS Nurse Coordinator
The ECC Corporate Compliance Officer

The committee meets at a minimum quarterly and is responsible for overall implementation and operation of the compliance program. At this meeting the committee will review information, action taken and status of compliance within the facility.

The Risk Areas

Quality of Care:

Since we believe the Quality of Care area of the recommended risk area by the OIG is so vital to the facility we have created a second set of specifics to that risk area. The facility has identified these possible risk areas as part of its Compliance Program. Because they are so important to maintaining well-being, the following are the focus and priorities for quality of care:

Skilled Facilities

Skin Integrity (health)
Eloperments

Psych Facilities

Psychiatric Rehab Compliance

Both Facility Type

Hydration
Nutrition
Resident Abuse
Incidents, Accidents and Safety
Medication & Treatment Compliance
Admissions Screening For Determination of Meeting Needs

It is the facility's policy to always and fully follow the various laws and regulations pertaining to treatment, services and needs of residents to gain or maintain the highest practical physical, mental and psychosocial well-being. Any quality issues, especially in these of areas of resident care, will be addressed immediately and with appropriate measures.

In addition, the facility takes care to:

- Provide a comprehensive, accurate assessment of each resident's functional abilities and a comprehensive care plan and utilizes appropriate programming and staffing to improve or maintain resident's abilities;
- Address the resident's right to a dignified existence that promotes freedom of choice, self determination, and reasonable accommodation of individual needs. This includes the right to non-discrimination and an abuse-free environment. A copy of the resident rights statement, which includes confidentiality policies, is distributed to all new employees and ongoing in-services are provided;
- Bill only for items and services provided as claimed, in a timely fashion, with the appropriate supporting documentation;
- Not enter in any agreement for money/service transaction that could be seen as a way to get referrals from others and or create an improper self-referral arrangement;
- Require the complete, accurate, and timely documentation of all provided services, including subcontracted services, as well as MDS information. This information will be secured and in a safe place with limited access;
- Make reasonable inquiry into the employment background of prospective employees and contractors as required by law. This includes with licensing/certification authorities for

employees and the OIG's excluded list of individuals/entities for all employees and contractors;

Provide employees with such training as may be reasonably necessary to make certain there is an understanding of the compliance program. This training should be included in new employee orientation and in-servicing annually. Educational activities may include videos, facility sponsored lectures, and other appropriate sponsored programs;

Promote an environment in which all employees can participate in reporting any suspected compliance issues, anonymously if so desired. All employees are required to participate in any compliance investigation being conducted by management or legal affairs.

It is the facility's policy that the promotion of, and following of, the elements of the Compliance Program be a factor in evaluating the performance of all employees. Supervisors must discuss with their employees these policies and inform them that they must follow as a condition of their employment. The facility may take disciplinary action up to and including termination for not following these policies or requirements.

Deficit Reduction Act:

ECC and facilities are committed to their role in preventing health care fraud and abuse and complying with applicable state and federal law related to health care fraud and abuse. The Deficit Reduction Act of 2005 requires employers to provide information about both federal False Claims Act and other laws, including state laws, dealing with fraud, waste and whistleblower protections for reporting these issues. To ensure compliance with such laws, ECC has policies and procedures in place to detect and prevent fraud, waste, and abuse, and also supports the efforts of federal and state authorities in identifying fraud and abuse.

An individual is not required to report any allegations of False Claims, abuse or fraud violations to ECC first. A report may be made directly to the Federal or State Departments of Justice, or the Offices of Inspector General. However, in many instances ECC believes that use of its own internal reporting process, and the internal compliance program is a better option because it allows ECC to quickly address any potential issues. ECC encourages contractors, employees or any other concerned individuals to consider first reporting suspected false claims, abuse or fraud issues to the facility administrator or the corporate compliance officer. ECC will not retaliate against any individual for informing us or the federal or state government of possible violations.

Concerns regarding Compliance, False Claim Acts, fraud or abuse can be reported to:

Corporate Compliance Liaison (Facility Administrator),

Or

Compliance Hotline:

877-772-6744

Or

Compliance Officer:

compliance@extendedcarellc.com

(847) 905-3206