

***Foothills Behavioral Health, LLC***  
***Partners In Recovery***

**CORPORATE COMPLIANCE  
PROGRAM**

**For quick reference:  
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*Foothills Behavioral Health*  
**CORPORATE COMPLIANCE PROGRAM**

**TABLE OF CONTENTS**

*MISSION AND VALUES*..... 1

*COMPLIANCE POLICY STATEMENT* ..... 1

*PURPOSE OF COMPLIANCE PROGRAM* ..... 2

*SCOPE OF COMPLIANCE PROGRAM*..... 2

*FBH COMPLIANCE PROGRAM ELEMENTS* ..... 3

*FBH BUSINESS CODE OF CONDUCT*..... 3

*CORPORATE COMPLIANCE OFFICER*..... 8

*CORPORATE COMPLIANCE COMMITTEE*..... 9

*EDUCATION AND TRAINING* ..... 10

*FBH COMPLIANCE COMMUNICATION* ..... 10

*INVESTIGATIONS*..... 12

*MONITORING*..... 13

*CORRECTIVE ACTION PLANS*..... 13

*SANCTIONS*..... 14

## ***MISSION AND VALUES***

### **The MISSION of FBH is to:**

Improve the quality of life and foster the mental health of Medicaid members and their families in Boulder, Broomfield, Clear Creek, Gilpin, and Jefferson Counties by:

- Facilitating access to effective mental health services
- Partnering and collaborating with network mental health centers and providers
- Promoting individual recovery from mental illness
- Advocating on behalf of individuals, communities, and mental health providers to improve the delivery of mental health care
- Managing finite resources efficiently

### **Our VISION of the Future:**

FBH will be a leader among Colorado behavioral health organizations in ensuring the highest level of consumer and family satisfaction with mental health services that are readily accessible, promote recovery and resilience, and improve quality of life for our members.

### **Our CORE VALUES:**

- Consumers are the most influential factor in our organization.
  - We are committed to uncompromising ethical practices in all that we do.
  - The contribution of all employees is essential to our success.
  - We measure our performance against the highest standards.
  - Our efforts must focus on improving outcomes in the mental health delivery system.
  - When challenges and opportunities arise, flexibility is a guiding principle.
  - We encourage innovation and, therefore, even mistakes become opportunities.
  - We are information-driven in our decision making.
  - We are responsible for contributing to the greater good of the human services system.
- We are committed to life-long learning, individually and collectively..

## ***COMPLIANCE POLICY STATEMENT***

FBH is dedicated to maintaining excellence and integrity in support of its Mission and all aspects of our operations and professional and business conduct. Our Business Code of Conduct as outlined later in this document serves as the foundation for our Corporate Compliance Program (the “Program”). Compliance means meeting all requirements that govern our business including laws, rules, regulations, contract requirements and internal policies and procedures. While certain aspects of the Program are specific to

FBH employees, we are committed to fostering an environment of compliance that extends beyond the employees of FBH to include network providers, core MHC providers, subcontractors, consultants, members of the FBH Board of Managers, and anyone acting on behalf of the organization (the FBH community).

## ***PURPOSE OF COMPLIANCE PROGRAM***

The FBH Corporate Compliance Program (the “Program”) is intended to provide reasonable assurance that FBH:

1. complies in all material respects with all federal, state and local laws and regulations that are applicable to its operations;
2. satisfies the conditions of participation in the Colorado Medicaid Community Mental Health Services Program and the terms of its contractual obligations with the State of Colorado, Department of Health Care Policy and Financing;
3. prevents, detects and reports known or suspected fraud and abuse or other forms of misconduct that might expose FBH to significant criminal or civil liability;
4. promotes self-auditing and self-policing, and provides for voluntary disclosure of violations of laws and regulations;
5. establishes, monitors, and enforces high professional and ethical standards.

## ***SCOPE OF COMPLIANCE PROGRAM***

The provisions of the Program apply to all clinical, billing and claims processing, business, and legal activities performed by FBH employees and other members of the FBH community as applicable . Categorically, the obligations for compliance include:

1. to comply with the FBH mission statement and the FBH Business Code of Conduct;
2. to become familiar with the purpose and applicable elements of the Program;
3. to perform professional roles in a manner which demonstrates commitment to compliance with all applicable laws and regulations;
4. to report known or suspected compliance issues to the Corporate Compliance Officer or by calling the Comply HotLine and participate in investigations to the point of resolution of an alleged violations;
5. to strive to prevent errors and provide suggestions to reduce the likelihood of errors.

## ***FBH COMPLIANCE PROGRAM ELEMENTS***

The FBH Board of Managers directed the development and implementation of an effective compliance program which includes the following elements:

### **1. Business Code of Conduct**

Development and distribution of the Code, as well as the development of new or revised written policies and procedures that further promote FBH's commitment to compliance. Such policies as referenced herein or as attachments should be considered an integral part of this Program and related training;

### **2. Corporate Compliance Officer and Compliance Committee designations**

### **3. Education and Training Program Development and Implementation**

To provide general compliance information to the employee population and other members of the FBH community as applicable as well as focused technical training for those functional areas that have the potential to put FBH at a greater degree of risk exposure;

### **4. Comply Hot Line Process Maintenance**

To receive complaints confidentially and to provide retaliation protection to all individuals who report concerns via a Comply *HotLine* call.

### **5. Sanction or Disciplinary Action Enforcement**

The enforcement of appropriate sanctions or disciplinary actions against employees and other members FBH community as applicable who violate compliance policies, applicable laws, regulations of the Colorado Medicaid Program contractual requirements;

### **6. Monitoring**

Performance improvement and other quality activities as needed to identify potential compliance issues and conduct ongoing compliance monitoring of potential problem areas; and

### **7. Investigation and Remediation**

The investigation and remediation of identified systemic problems and the development of appropriate corrective action plans to remediate such problems.

## ***FBH BUSINESS CODE OF CONDUCT***

The FBH Business Code of Conduct provides the guiding standards for our business actions and decisions. Although the Code of Conduct can neither cover every situation in the daily conduct of FBH's varied activities nor substitute for common sense, individual judgment or personal integrity, it is the

obligation of each FBH employee and other members of the FBH community, as applicable, to adhere, to the principles set forth below.

**1. Comply With All Applicable Laws.**

To uphold all applicable, local, state and federal laws and regulations that govern the conduct of its business activities. All employees and other members of the FBH community must be aware of the legal requirements and restrictions applicable to their respective positions, duties, and roles. FBH expects each of its community members to refrain from engaging in activity which may negatively impact the status of the organization, including, but not limited to unacceptable lobbying and political activities.

Questions about the legality or propriety of any actions undertaken by or on behalf of FBH should be referred immediately to one's supervisor and the FBH Corporate Compliance Officer. To enhance such communication and reporting, FBH has implemented the **Comply HotLine**, a confidential telephone service that can be reached by dialing **303-432-5985**. Any member of the FBH community who wishes to report violations or discuss ethical concerns may do so through the **Comply HotLine**.

**2. Conduct Its Affairs in Accordance With the Highest Ethical Standards.**

FBH and its employees and other members of the FBH community shall strive to conduct all activities in accordance with the highest ethical standards of the community and their respective professions at all times and in a manner which shall uphold FBH's reputation and standing

**3. Avoid Conflict of Interest.**

A conflict of interest arises when individuals have a financial or other interest that could influence their judgment or actions on behalf of FBH. The appearance of a conflict may be just as harmful as an actual conflict. We are, therefore, obligated to avoid situations or conduct that could influence (or appear to influence) objective decisions in the performance of assigned duties and responsibilities or that could raise questions as to the honesty and integrity of FBH or negatively impact its reputation. Employees and members of any governing bodies are required to sign the Conflict of Interest Disclosure Statement annually.

**4. Strive to Attain the Highest Standards for All Aspects of Consumer/Family Care.**

All employees and other members of the FBH community must support FBH's Mission to support the provision of mental health services of the highest quality that respond to the needs of our consumers, their families and the community as a whole. The care provided must be reasonable and necessary to the care of each consumer, as appropriate to their needs, and such care must be provided by properly qualified and credentialed individuals and organizations. All such care must be properly documented as required by law and regulation, reimbursement requirements and professional standards. The **FBH Member Handbook and Provider Manual** are incorporated herein by reference as critical tools to be used in aspects of the Corporate Compliance training and accountability.

**5. Provide Equal Opportunity and Respect the Dignity of All Who Provide and Receive Services.**

FBH is committed to providing services related to its Mission for all persons, without regard to age, race, color, nationality or ethnic origin, religion, gender, sexual orientation, disability or veteran's status. FBH is committed to maintaining an environment that respects the dignity of each individual in the community. Therefore, prohibited discrimination in any form or context will not be tolerated.

**6. Maintain the Appropriate Levels of Confidentiality for Information and Documents Entrusted to It.**

Employees and other members of the FBH community may have access to medically and clinically sensitive and personal and proprietary information, the confidentiality of which must be protected. Adherence to all applicable laws and regulations, including applicable provisions of the Health Insurance Portability and Accountability Act (“HIPAA”) along with applicable policies and procedures to ensure that confidential information is properly maintained and inappropriate or unauthorized release is prevented. FBH and its community members will create and keep records and documentation that conform to legal, professional and ethical standards. Additional references and standards are included in the Provider Manual and the FBH Confidentiality Policy and Procedure.

**7. Maintain a Relationship of Integrity With Respect to Payment for Services.**

FBH and other members of the FBH community as applicable shall ensure that all requests for payment for services are (i) reasonable, necessary and appropriate; (ii) provided by properly qualified persons, and (iii) the claims for such services are billed in the correct amount and supported by appropriate documentation.

**Fraud and Abuse**

FBH is heavily regulated and required to participate in the prevention, detection, reporting and correction of potential incidents of fraud, abuse/misuse, and misutilization. The following definitions are taken from State and Federal guidelines:

**Fraud**

An intentional (willful or purposeful) deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to him/herself or some other person. It includes any act that constitutes fraud under applicable Federal or State law.

**Abuse/Misuse**

Practices that are inconsistent with sound fiscal, business or medical practices, and that result in an unnecessary cost to the Medicaid program, or in seeking reimbursement for goods or services that are not medically necessary or that fail to meet professionally recognized standards for healthcare.

**Misutilization**

The incorrect, improper or excessive utilization of medical care and services which are not medically necessary, at the recipient's insistence or request.

Of particular significance in FBH's efforts to prevent and detect Medicaid fraud, waste, and abuse are the provisions contained in the Federal False Claim Act (The Act) and related protections for whistleblowers. The Act accomplishes this by making it possible for the Federal Government to bring civil actions against to recover damages and penalties when healthcare providers submit false claims. Penalties can include up to three times actual damages and an additional \$5500 to \$11,000 per false claim.

The Act prohibits, among other things:

- Knowingly presenting or causing to be presented to the federal government a false or fraudulent claim for payment or approval
- Knowingly making or using, or causing to be made or used, a false record or statement in order to have a false or fraudulent claim paid or approved by the government
- Conspiring to defraud the government by getting a false or fraudulent claim allowed or paid; and
- Knowingly making or using, or causing to be made or used, a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the government

The Act also contains a qui tam (or whistleblower) provision which allows a private person to bring civil actions for violations of the Federal False Claim Act on behalf of the federal government. These persons are entitled to receive percentages of monies obtained through settlements, penalties, and/or fines collected..

**Persons bringing these claims are granted certain protections under the law.** Specifically, any whistleblower who is discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against by his or her employer because of reporting violations of the Federal False Claim Act will be entitled to reinstatement with seniority, double back pay, interest, special damages, and attorney's fees and costs sustained as a result of discriminatory treatment.

FBH is required to take appropriate disciplinary and enforcement action against employees, Providers, subcontractors, consultants, Members, and agents of FBH found to have committed Medicaid fraud. FBH is also required to take appropriate corrective actions to prevent further offenses through systems and process changes.

All employees, Providers, subcontractors, consultants, Members, and agents of FBH are responsible for reporting potential and/or suspected incidents of Medicaid fraud, abuse, misuse or misutilization, including actual or potential violations of law or regulation. The following methods may be utilized to report such incidents:

- Contact the Corporate Compliance Officer (CCO) at (303) 432-5957.
- Call the FBH confidential Comply Hotline at (303) 432-5985.

The CCO initially reports instances of suspected fraud and abuse to the Executive Director and to the Department of Healthcare Policy and Financing within 10 days as so directed.

#### **8. Conduct All Business With Honesty and Integrity.**

All business practices of FBH must be conducted with honesty and integrity and in a manner that promotes FBH's reputation with consumers, service providers, competitors and the communities we serve. All employees and other members of the FBH community, as applicable, will:

- ❖ adhere to proper and legally accepted business practices and federal and state fraud, abuse and referral prohibitions in dealing with providers and referral sources;
- ❖ conduct business transactions free from offers or solicitation of gifts, favors or other improper inducements;
- ❖ conform to all applicable antitrust laws and regulations, and ensure that FBH does not violate laws and regulations with respect to (i) pricing or other sale terms or conditions, (ii) improper sharing of competitive information, or (iii) the impermissible exclusion of others from economic activities;
- ❖ maintain and protect the property and assets of FBH, including intellectual property and proprietary information, equipment and supplies, and funds of FBH and refrain from converting FBH assets to personal use;
- ❖ maintain the confidentiality of proprietary information belonging to other persons or entities doing business with FBH; and
- ❖ prepare accurate financial reports, accounting records, reports, expense accounts, time sheets and other documents so that they completely and accurately represent the relevant facts and true nature of all FBH business transactions.

#### **9. The Business Code of Conduct is Integral to the Operation of FBH and all of its Activities.**

The Business Code of Conduct exists for the benefit of FBH, its employees and other members of the FBH community. All parties are encouraged to suggest changes or additions to the Code of Conduct.

The Business Code of Conduct augments, but does not limit, specific policies and procedures of FBH.

It is the obligation of each employee of FBH and other members of the FBH community to uphold the standards set forth in the Business Code of Conduct and to report violations by following the reporting procedures established by the Program.

Officers, managers and all employees of FBH have a special duty to adhere to the principles set forth in the Business Code of Conduct, to support other business associates in their adherence to the Business Code of Conduct, to recognize and detect violations of the Code, and to enforce the standards set forth in support of the Code.

It is a violation of the Business Code of Conduct to take any action in reprisal against anyone who reports, in good faith, suspected violations of the Code or other FBH policies and procedures. Alleged violations of the Business Code of Conduct or other policies and procedures of FBH will be investigated by persons designated by, and pursuant to procedures established by FBH.

Disciplinary action for violations of the Business Code of Conduct and other FBH policies and procedures shall be enforced through the disciplinary policies and procedures of FBH. Disciplinary actions will be determined on a case-by-case basis and may include dismissal from employment. FBH will cooperate with law enforcement authorities as allowable in connection with the investigation and prosecution of any member of the FBH community who violates a law governing the activities of FBH.

## ***CORPORATE COMPLIANCE OFFICER***

The Program is directed by the Corporate Compliance Officer (CCO). The CCO will be an employee appointed by the Executive Director with the approval of the Board of Managers.

The CCO shall be a high-level employee of FBH. The CCO shall report directly and be responsible to the Executive Director and to the Board of Managers. Any change in the personnel responsible for administering this Plan shall be approved by the Board of Managers.

The CCO's duties will be:

1. To oversee and monitor FBH's compliance activities.
2. To report on a periodic basis to the Executive Director, the Corporate Compliance Committee (CCC) and the Board of Managers and Board of Owners on the progress of implementation.
3. To monitor the *Comply HotLine* to ensure that employees and other members of the FBH community are able to report suspected improprieties without fear of retribution, and implementing processes to investigate, resolve and document all issues reported via *Comply HotLine*;
4. To assist the Executive Director, the CCC and the Board of Managers and Board of Owners in establishing methods to improve FBH's efficiency and quality of services, and to monitor FBH's vulnerability to fraud and abuse.
5. To periodically review the Program and recommend revisions as necessary to meet changes in the business and regulatory environment.

6. To develop, coordinate and participate in a multifaceted educational and training program that focuses on the elements of the Program, and seeks to ensure that all employees and other members of the FBH community are knowledgeable of and comply with all applicable aspects of the Program.
7. To ensure that independent contractors and agents who furnish medical services to FBH are aware of the requirements of the Program with respect to coding, billing and marketing, among other things.
8. To work closely with legal counsel to review and update the education, training and standards of conduct to reflect the current federal, state and local laws.
9. To receive and investigate reports of possible illegal conduct or other conduct that violates the Business Code of Conduct. To independently investigate and act on matters related to compliance, including the flexibility to design and coordinate internal investigations (e.g., responding to reports of problems or suspected violations) and any resulting corrective action with all FBH departments.
10. To develop policies and programs that encourage staff to report suspected fraud and other improprieties without fear of retaliation.
11. To ensure that the Plan has been effectively communicated to all employees, volunteers, board members, and other members of the FBH community as appropriate.
12. To establish and administer a communication system that is available to all employees and other members of the FBH community to report any suspected illegal conduct or other conduct that violates the Business Code of Conduct.
13. To notify the appropriate law enforcement agency of possible illegal misconduct if so directed by the Executive Director.
14. To coordinate with the CCO's of the Network Mental Health Centers on matters that assure compliance with Federal, State and local laws and regulations applicable to the prime contract and serve as a member of their Corporate Compliance Committees.

## ***CORPORATE COMPLIANCE COMMITTEE***

Under the Direction of the Executive Director, the CCO will appoint a Corporate Compliance Committee (CCC) comprised of at least one representative from each of the Network Mental Health Centers, the Chief Financial Officer for FBH, the Medical Director, and senior manager representatives from the various clinical and administrative departments within FBH including consumer and family affairs,

utilization management , and quality improvement as individuals who have broad backgrounds and expertise in operations, monitoring quality, service delivery and legal/regulatory compliance.

The CCC advises the CCO and assists in the development, implementation and monitoring of the FBH Compliance Program. The CCC's functions include:

- monitoring changes in the health care environment, including regulatory changes with which FBH must comply, and identifying the impact of such changes on specific risk areas;
- recommending the revision of policies and procedures, as needed, so that such policies support the Business Code of Conduct;
- monitoring, through summary reports shared by the CCO, the nature of written or verbal reports, the types of hotline calls coming through the *Comply HotLine* system, identifying trends or patterns; and evaluating the adequacy of the investigation, follow up and resolution of such calls and reports.

## ***EDUCATION AND TRAINING***

The FBH policy on the dissemination and implementation of the Program and other compliance education/training initiatives states that:

1. All FBH employees and other members of the FBH community as applicable will be introduced to and trained in the Program and the FBH Business Code of Conduct. The orientation and training will reinforce the need for strict compliance with all applicable laws and policies and procedures and will advise employees that any failure to comply will be documented on the employees' performance evaluation and may result in disciplinary action.
2. In the context of new employee orientation, new employees will be introduced to the Business Code of Conduct, informed of the Program and informed of the ways in which they may access the CCO and the *Comply HotLine* service.
3. Focused in-service training will be provided annually to employees involved in the assignment of diagnosis and procedure codes for claims and billing.
4. FBH will make compliance materials and orientation available to independent providers and other members of the FBH community as applicable and will use its best efforts to obtain their acknowledgement of their awareness of the basics of the Program and their commitment to compliance..
5. Attendance at all training programs for employees will be monitored and properly documented.

## ***FBH COMPLIANCE COMMUNICATION***

### **1. Direct Access to the Compliance Officer**

FBH recognizes that an open line of communication between the CCO and employees and other members of the FBH Community is critical to the success of the Program. In addition to using

***Comply HotLine***, members of the FBH Community are strongly encouraged to report incidents of potential fraud or to seek clarification regarding legal or ethical concerns directly from the CCO by calling 303-432-5957 or by mail at 9101 Harlan Street, Suite 100, Westminster, CO 80031.

Employees and providers who, in good faith, report possible compliance violations will not be subjected to retaliation or harassment as a result of their reports. Retribution related to reporting of compliance concerns is prohibited as a provision of the Federal False Claim Act and anyone who engages in such prohibited activity will be subject to disciplinary action. Concerns about possible retaliation or harassment should be reported to the CCO. All such communications will be kept as confidential as possible but there may be times when the reporting individual's identity may become known or may have to be revealed if governmental authorities become involved.

The CCO and/or members of the Corporate Compliance Committee will seek advice and guidance directly from legal counsel to assist in the investigation of fraud and abuse reports concerning members of the FBH Community who may have participated in illegal or unethical conduct.

## **2. *ComplyLine* - Hotline Service**

A key element of the FBH Compliance Program is the telephone service called ***Comply HotLine*** that can be accessed by dialing **303-432-5985**. ***Comply HotLine*** is a completely confidential resource that can be used anonymously to allow all employees and other members of the FBH community to voice concerns over any situation that may conflict with FBH's commitment to excellence or to report misconduct that could give rise to legal liability if not corrected.

A log is maintained of all ***Comply HotLine*** calls, the results of investigations and continued monitoring, if applicable. Reports of ***Comply HotLine*** calls, summarized by category and by operational area, will be provided at least annually to the Executive Director and Board of Managers to identify any significant trends or patterns.

## **3. Employee Background Checks and Credentialing Procedures**

For all new employees, FBH conducts a reference and criminal background check as part of the hiring process. Background checks are also completed on all members of the Board of Managers and Board of Owners and FBH senior management team.

Similarly, the management and clinical staffs of the Network Mental Health Center Providers along with contracted network clinical providers are subject to a thorough review and credentialing process. All facilities and agencies are also subject to credentialing as part of the contracting process.

## **4. Record Retention**

FBH is committed to complying with the record and documentation requirements under federal, state, and local laws and regulatory guidelines including but not limited to policies established according to Medicaid, Medicare, and HIPAA regulations. Further, FBH's Retention and Destruction of Records Policy is hereby incorporated into this document by reference.

## ***INVESTIGATIONS AND REPORTING***

The CCO has the authority and responsibility to investigate any potential compliance issue and to direct others to do so as appropriate. The CCO or his/her designee will:

- promptly initiate an investigation of a potential compliance issue to make a case-by-case determination as to whether a violation has occurred. The CCO will either personally conduct the investigation or refer the complaint to a more appropriate area within FBH or outside, such as internal or outside legal counsel, auditors or health care consultants with needed expertise. The CCO may request assistance in the investigation from the person or persons who filed a complaint, other personnel or external sources, as appropriate;
- report all instances of suspected non-compliance involving Medicaid fraud and abuse initially to the Executive Director and to the Department of Healthcare Policy and Financing within 10 days as so directed
- request legal counsel to participate in the investigation and provide legal advice in any such matter, as appropriate. In any investigation involving legal counsel, the fact gathering is to be conducted under counsel's direction and control. .
- prepare a report of each investigation which will include documentation of the issue and, as appropriate, a description of the investigative process, copies of interview notes and key documents, a log of the witnesses interviewed and the documents reviewed, the results of the investigation, any disciplinary action and the corrective action implemented to prevent recurrence. Reports of each investigation and the status of the corrective action will be presented to the Executive Director and Board of Managers on an as needed basis, but not less than annually..
- report violations of criminal, civil or administrative law to the appropriate federal and/or state authority within a reasonable time period after determining that there is credible evidence of such violation.

## ***MONITORING***

One of the principal responsibilities of the CCO is to oversee and monitor the implementation of the FBH Compliance Program. The CCO works with the Corporate Compliance Committee to track and monitor implementation of the Compliance Program. Progress reports of the ongoing monitoring activities, including identification of suspected noncompliance, will be maintained by the CCO and shared annually with the Executive Director and the Board of Managers.

Monitoring techniques that may be used as applicable include:

- compliance audits focused on those areas within FBH that have potential exposure to government enforcement actions as identified in (i) Special Fraud Alerts issued by the Office of Inspector General (OIG) , (ii) OIG annual Work plan , (iii) initiatives or requests from the Health Care Policy and Financing and (iv) law enforcement initiatives.
- Bench marking analyses which provide operational snapshots from a compliance perspective that identify the need for further assessment, study or investigation.
- periodic reviews in the areas of Program dissemination, communication of FBH's compliance standards and Business Code of Conduct, availability of *Comply HotLine* and adequacy of compliance training and education to ensure that the Program's compliance elements have been satisfied.. The review process will be conducted through on-site interviews and survey questionnaire completion by key management in any area of operations.
- subsequent reviews to ensure that corrective actions have been effectively and completely implemented.

## ***CORRECTIVE ACTION PLANS***

When a compliance issue has been identified that requires remedial action, the CCO and/or designee will develop a corrective action plan specifying the tasks to be completed, completion dates and responsible parties. Legal counsel and other appropriate personnel will be consulted as appropriate. Each corrective action plan must be approved by the Executive Director or his/her designee prior to implementation.

Corrective action plans may require that compliance issues be handled in a designated way, that relevant training takes place, that restrictions be imposed on particular employees, or that the matter be disclosed externally. Sanctions or discipline, in accordance with the standard disciplinary policies and procedures of FBH may also be recommended.

## ***SANCTIONS***

Corrective action for employee noncompliance will be initiated by the appropriate management personnel, who must notify Human Resources in accordance with the standard disciplinary policies and procedures. Enforcement will be administered by the parties identified by the CCO in consultation with the immediate supervisor and, if appropriate, Human Resources. Disciplinary actions will be determined on a case-by-case basis and will be taken appropriately, equitably and consistently, given the underlying circumstances and the degree of negligence or reckless conduct.

Other members of the FBH community will be sanctioned as applicable under the terms and conditions of the business or contractual relationship established with FBH.