Elite Health Plan	Dept: Corporate
POLICIES AND PROCEDURES	Effective Date: January 1, 2025
Subject: Compliance – I – Policies and Procedures, Standards of Conduct	Policy No: PC403 Revised: Page **1** of **4**

Reviewed and Accepted By:

(Committee or Department Head) _____ Board of Directors_____

Authorized Signature: _____ _____ **Date:** ____1/27/2025_____

Policy: Elite Health Plan has written policies, procedures, and standards of conduct clearly stating its strong commitment to prevent, detect and correct fraud, waste and abuse and to comply with all applicable Federal and State standards, which include, but are not limited to:

- Medicare Part C and D statute, regulations and program manuals; ·
- Federal False Claims Act;
- Anti-Kickback Statute;
- Physician Self-Referral ("Stark") Statute;
- Beneficiary Inducement Statute;
- Fraud Enforcement and Recovery Act of 2009, and
- Health Insurance Portability and Accountability Act (HIPAA & HITECH).
- Anti-Discrimination Federal & State

The Plan-wide Corporate Compliance Program includes written policies and procedures that:

1. Articulate Elite Health Plan's commitment to comply with all applicable Federal and State statutory and regulatory requirements;

2. Describe compliance expectations as embodied in the Standards of Conduct and Ethics;

3. Implement operations of the compliance program;

4. Describe ramifications and/or penalties for failing to comply with standards of conduct, policies, and procedures, and the failure to act in an ethical manner.

5. Ensure continued operation and maintenance of the compliance program;

6. Provide guidance to associates and others on dealing with potential compliance issues, including fraud, waste and abuse and avoidance of conflicts of interests;

7. Describe obligations of employees, management, members of Boards of Directors, and first tier, downstream and related entities (FDRs) to report violations of law and policy to Elite Health Plan, the Centers for Medicare & Medicaid Services (CMS), CMS' designate, the Department of Health Care Services (DHCS), law enforcement, and/or other regulatory agencies as appropriate and the process to communicate compliance issues to appropriate compliance personnel;

8. Describe how potential compliance issues, including fraud, waste, and abuse are investigated and resolved by Elite;

9. Specify the disciplinary actions that can be imposed for violations of law and ethics, Compliance Program noncompliance and fraud, waste and abuse; and

10. Include a policy of non-retaliation for good faith participation in the compliance program, including but not limited to reporting potential compliance and fraud, waste, and abuse issues, investigating issues, conducting self-evaluations, audits and remedial actions, and reporting to appropriate officials.

Each functional area of the health plan and FDRs are required to have policies and procedures in place that specify the duties that employees must perform in their day-to-day work in order to ensure that applicable regulations and laws are followed and to avoid fraud, waste and abuse.

Policies and procedures are reviewed annually and updated to reflect changes to requirements, as applicable. Necessary revisions are made promptly if there is a change in the law or circumstance which materially affects policies and/or procedures. The Executive Owner is responsible for ensuring the policy is compliant with federal and state laws, regulations, accreditation standards, and other Plan policies. The Executive Owner must be a Manager, Director, or VP or above and has final approval authority for a policy.

The Compliance Department maintains policies and procedures that support the Compliance Program and the required elements of an effective compliance program. The Compliance Department reviews these policies and procedures on an annual basis for possible revisions that may result from a change in company policy or changes in applicable laws or regulations. The Compliance Committee reviews and approves substantive changes to the policies and procedures that support the Compliance Plan prior to such changes becoming effective. Policy recommendations are then provided to the Board of Directors annually before re-fresher training and updates to the Compliance Program are provided for review. Policies are stored on the Plan's Intranet, The Compliance Software, in Compliance and in respective functional areas, and are available to all associates.

Reviewed and Accepted By:

(Committee or Department Head) _____ Board of Directors_____

Authorized Signature: _____ _____ **Date:** ____1/27/2025_____

B. Standards of Conduct/Code of Conduct: All associates, Directors, and FDRs are required to familiarize themselves with the laws, regulations, and guidelines applicable to their jobs and to put forth their best efforts to follow the laws, rules, and regulations. The Standards of Conduct and Ethics establishes the standards of conduct that all Plan officers, directors, managers, volunteers and associates are required to follow. Those who violate the standards in the Standards of Conduct and Ethics are subject to disciplinary action up to and including termination of employment or contract. The Plan reviews the Standards of Conduct and Ethics on an annual basis for possible revisions that may result from a change in Company policy or changes in applicable laws or regulations. The Standards of Conduct and Ethics is endorsed by the Chief Executive Officer, Corporate Compliance Committee with acceptance from the Board of Directors. The Standards of Conduct are available to all associates via the employee handbook, Intranet site, and the Corporate Compliance Program. These documents are available to FDRs and other providers via the provider portal on the Plan's organization website. New associates receive a hardcopy version of the Corporate Compliance Program and the Employee Handbook which both contain the Standards of Conduct during new hire training. Associates are notified of changes via email to their personal work spaces and others via Committees of the Board. An electronic copy of the Code is made available to all associates, Directors and FDRs within 90 days of hire (onboarding) or contracting and within 60 days after a material change.

C. FDRs: FDRs have the option to:

1) Adopt Elite Health Plan's Code, Compliance Plan, as applicable, and associated compliance policies and procedures;

2) Develop and follow their own code of conduct, compliance plan, and/or equivalent policies and procedures that describe their commitment to comply with applicable laws and regulations by including all information that is present on the MLN matters CBT CMS Online FWA and Compliance training (without changing slides provided by CMS) and can show proof of certificate for training; this will be accepted and proof of training and materials are required and audited. Plan utilizes ICE FTE Attestation online submission. As of 2019 CMS Updated policy – FWA training is not required for FDRs.

Reviewed and Accepted By:

(Committee or Department Head) _____ Board of Directors_____

Authorized Signature: _____ _____ **Date:** ____1/27/2025_____

D. Maintenance of Records: Records of compliance and fraud, waste, and abuse investigations, corrective actions, meeting minutes, and other pertinent information pertaining to Elite Health Plan's compliance are maintained for a minimum of ten (10) years.

References: Title 42 Code of Federal Regulations (CFR) 422.503(b)(4)(vi)(A)423.504(b)(4)(vi)(A) CMS Medicare Managed Care Manual Chapter 21 – Medicare Compliance Program Guidelines – Section 50.1 Prescription Drug Benefit Manual Chapter 9 – Medicare Compliance Program Guidelines – Section 50.1