

**EPIC MANAGEMENT, L.P.  
BEAVER MEDICAL GROUP, L.P.  
EPIC HEALTH PLAN**

**ADMINISTRATIVE POLICY AND PROCEDURE  
COMPLIANCE**

<b>SUBJECT:</b> Development of Compliance Program Policies and Code of Conduct	
<b>DRAFTED BY:</b> Sherry Miller, CCO	<b>DATE:</b> 8/17/2020
<b>REVIEWED BY:</b>	<b>DATE:</b>
<b>REVISED BY:</b>	<b>DATE:</b>
<b>APPROVED BY:</b> Compliance Committee	<b>DATE:</b> 8/17/2020
<b>BOARD APPROVAL DATE:</b> N/A	
<b>EFFECTIVE DATE OF POLICY:</b> 9/1/2020	

1. **PURPOSE:** This EPIC Policy on the Development of Compliance Program Policies and Code of Conduct sets forth EPIC’s commitment to developing, periodically updating, and distributing EPIC’s Compliance Program policies and EPIC’s Code of Conduct to all Personnel.
2. **ATTACHMENTS:** N/A.
3. **DEFINITIONS:**
  - a. All capitalized terms used but not defined in this Policy shall have the meaning attributed to them in the EPIC Compliance Program Definitions Policy.
  - b. In addition, the following capitalized terms shall have the following meanings for purposes of this Policy:
    - i. “Compliance Concern” refers to any suspected misconduct, compliance irregularities, or any other activity, practice, or arrangement that any Personnel member believes in good faith violates or may violate applicable laws or regulations, Federal Health Care Program requirements, EPIC Compliance Program Policies, or the EPIC Code of Conduct.
    - ii. “Compliance Program Policies” refers to EPIC’s written policies and procedures regarding the operation of its Compliance Program, including EPIC’s compliance with Federal Health Care Program requirements, applicable law, and the CIA.

- iii. “Ineligible Person” includes any individual or entity that (1) is excluded from participation in any Federal Health Care Program; or (2) has been convicted of a criminal offense that falls within the scope of 42 U.S.C. § 1320a-7(a) but has not yet been excluded.

4. **POLICY:**

a. **Development of Compliance Program Policies**

- i. The Corporate Compliance Officer, in consultation with the Compliance Committee, shall develop and implement EPIC’s Compliance Program Policies.
- ii. The Compliance Program Policies shall address the operation of EPIC’s Compliance Program, including EPIC’s compliance with Federal Health Care Program requirements, applicable law, and the CIA.
- iii. More specifically, the Compliance Program Policies shall address the following topics:
  - (1) The authority and responsibilities of EPIC’s Corporate Compliance Officer;
  - (2) The structure, authority, and responsibilities of EPIC’s Compliance Committee;
  - (3) The Board’s compliance duties and obligations;
  - (4) The required process for Personnel in management positions to follow for the purpose of completing an annual management compliance certification;
  - (5) The development, implementation, enforcement, and updating of EPIC’s Compliance Program Policies;
  - (6) EPIC’s commitment to compliance training and education, as required by the CIA and beyond;
  - (7) The duty of all Personnel to report Compliance Concerns, and procedures for reporting such Compliance Concerns;
  - (8) EPIC’s process for assessing and reviewing Compliance Concerns;
  - (9) EPIC’s commitment to protect, and the protections for, Personnel from retaliation or retribution for reporting Compliance Concerns in good faith;

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- (10) Procedures to ensure that new and current Personnel are not Ineligible Persons, including screening against relevant exclusion lists and remedial measures;
  - (11) The investigation of credible information regarding potential overpayments received from any Federal Health Care Program, and the identification, quantification, and repayment of such overpayments;
  - (12) Prompt, complete, and accurate documentation, coding, and billing;
  - (13) Internal monitoring and auditing of EPIC's compliance with Federal Health Care Program requirements, applicable law, and the CIA.;
  - (14) Improper inducements, kickbacks, and self-referrals;
  - (15) Corrective and/or disciplinary action against Personnel who violate EPIC's Compliance Policies and/or Code of Conduct; and
  - (16) Any other topic deemed necessary or appropriate by the Corporate Compliance Officer, in consultation with the Compliance Committee and Health Care Counsel.
- iv. All EPIC Compliance Programs Policies should be clear and concise and follow the same general format.

**b. Development and Implementation of Code of Conduct**

- i. The Corporate Compliance Officer, in consultation with the Compliance Committee and Health Care Counsel, shall develop and implement a written Code of Conduct setting forth the organization's commitment to compliance and fundamental principles and values.

**c. Review and Updating of Compliance Program Policies and Code of Conduct**

- i. The Corporate Compliance Officer, in consultation with the Compliance Committee and Health Care Counsel, shall review EPIC's Compliance Program Policies and Code of Conduct as necessary, but at a minimum, once every twelve (12) months, to assess whether any updates should be made. Updates may include modifications to current Compliance Program Policies and/or the Code of Conduct, the addition of new Compliance

Program Policies, and/or the removal of existing Compliance Program Policies.

- ii. EPIC's Compliance Program Policies and/or the Code of Conduct shall be updated, as appropriate, to address:
  - (1) Changes in applicable law or Federal Health Care Program requirements;
  - (2) The requirements of the CIA;
  - (3) New compliance risk areas, or changes in existing risk areas;
  - (4) Changes in the nature or scope of EPIC's business (including, without limitation, EPIC's contractual obligations); and
  - (5) Indications that existing Compliance Program Policies have been ineffective in preventing compliance violations or that new or additional Compliance Program Policies would be more effective in preventing or avoiding the recurrence of misconduct.

**d. Distribution of Compliance Program Policies and Code of Conduct**

- i. EPIC's Compliance Program Policies shall be made available to all Personnel on the EPIC Management compliance website, <https://www.epicmanagementlp.com/ComplianceCenter>.
  - (1) All Personnel shall be reminded of the location of EPIC's Compliance Program Policies as part of EPIC's General Compliance Training. As discussed in the EPIC Compliance Training and Education Policy, the General Compliance Training shall be provided to all Personnel on at least an annual basis, and to new Personnel within thirty (30) days of their start date (as part of the orientation process).
  - (2) All Personnel shall be notified of any updates to the Compliance Program Policies within two business days of the update, aside from minor technical or grammatical corrections.
- ii. EPIC's Code of Conduct shall be distributed either electronically or in hard-copy to all Personnel.
  - (1) The Code of Conduct shall be distributed to all Personnel on at least an annual basis, and to any Personnel upon request.

The Code of Conduct shall be also be distributed to all Personnel within forty-eight (48) hours following any update, aside from minor technical or grammatical corrections.

- (2) New Personnel shall receive the Code of Conduct as part of the EPIC orientation process, but, in any event, no later than thirty (30) days of their start date.

e. **Employment Evaluation**

- i. Compliance with EPIC's Compliance Program Policies and Code of Conduct is an element of each EPIC employee's performance evaluation.

f. **Certification**

- i. On an annual basis, all current Personnel shall certify in writing that they have read, understand, and will comply with EPIC's Compliance Program Policies and Code of Conduct.
- ii. All new Personnel shall certify in writing, within thirty (30) days of their start date, that they have read, understand, and will comply with EPIC's Compliance Program Policies and Code of Conduct.

g. **Documentation**

- i. The Corporate Compliance Officer (or their designee) shall retain current versions of the Compliance Program Policies and Code of Conduct, as well as all historic versions covering the prior six (6) years.
- ii. Copies of all Personnel certifications required under this Policy shall be maintained in each individual's personnel file.
- iii. All of the documentation enumerated above shall be maintained in compliance with the EPIC Compliance Program Records Retention Policy.