



CORPORATE COMPLIANCE PROGRAM

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Foothills Behavioral Health Partners **CORPORATE COMPLIANCE PROGRAM**

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Introduction

Overview of the Organization

Foothills Behavioral Health Partners, LLC, (FBHPartners) is a Behavioral Health Organization licensed as a Limited Service Licensed Provider Network by the State of Colorado, Division of Insurance. We are contracted with the State of Colorado on behalf of the Department of Health Care Policy and Financing (HCPF) to manage mental health services for individuals with certain Medicaid eligibility that live in the West Metro Area. This area includes the counties of Boulder, Broomfield, Clear Creek, Gilpin and Jefferson. FBHPartners' financial owners include two non-profit community mental health centers (Jefferson Center for Mental Health and Mental Health Partners) and a private, for profit national managed care company, ValueOptions. ValueOptions also contracts with FBHPartners to provide certain administrative services as well as Delegated functions described in its behavioral health service contract. ValueOptions' duties, in support of the Compliance Program, are detailed in the Management Services Agreement and Delegation Agreement.

Mission Statement

The mission of FBHPartners 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.

Purpose of Compliance Program

The purpose of FBHPartners' Corporate Compliance Program (Compliance Program) is to ensure that FBHPartners:

- Complies in all material respects with all federal, state and local laws and regulations that are applicable to its operations.
- 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 (HCPF).
- Prevents, detects and reports known or suspected fraud and abuse or other forms of misconduct that might expose FBHPartners to criminal or civil liability.
- Promotes self-auditing and self-policing, and provides for voluntary disclosure of violations of laws and regulations.
- Establishes, monitors, and enforces high professional and ethical standards.

The Compliance Program is prepared by the FBHPartners Corporate Compliance Officer (CCO) and approved by the Chief Executive Officer before being submitted to the Board of Managers. The Board of Managers approves the Program and recommends adoption by the FBHPartners Board of Directors.

Scope of Compliance Program

This Compliance Program applies to: all clinical, billing and claims processing, and any other business activities performed by employees, officers, Board members, and equity owners of FBHPartners; network providers; persons with an employment, consulting or other arrangement with FBHPartners for the provision of items and services that are significant and material to FBHPartners' obligations under its contract with HCPF. All of the above are herein referred to as the FBHPartners community.

The FBHPartners community must:

- Comply with the FBHPartners Mission Statement and Standards of Conduct.
- Become familiar with the purpose and applicable elements of the Compliance Program.
- Perform professional roles in a manner that demonstrates commitment to compliance with all applicable laws and regulations.
- Report known or suspected compliance issues to the Corporate Compliance Officer (CCO) or by calling the Compliance Hotline at 303 432-5985 and participate in investigations to the point of resolution of alleged violations.
- Strive to prevent errors and provide suggestions to reduce the likelihood of errors.

The Program is organized around the Seven Elements outlined in the 2007 Federal Sentencing Guidelines:

1. Standards of Conduct
2. Program Oversight
3. Due Diligence in Hiring, Board Appointments and Delegation
4. Training and Education of Employees, Members and Providers
5. Reporting Mechanisms, Investigation and Monitoring Systems
6. Enforcement of Standards (Disciplinary Systems)
7. Prompt Response to Detected Offenses

Corporate Compliance Program Elements

1. Standards of Conduct

FBHPartners has established Standards of Conduct (Standards) for all of our business actions. The FBHPartners community must adhere to the Standards and has an affirmative obligation to report suspected violations of the Standards to the FBHPartners CCO. FBHPartners will not take any action in reprisal against anyone who, in good faith, reports suspected violations of the Standards or other FBHPartners policies and procedures. All alleged violations will be investigated by the CCO following the process described in this document.

Disciplinary action for violations of the Standards and other FBHPartners policies and procedures shall be enforced in accordance with the disciplinary policies and procedures of FBHPartners and may include dismissal from employment. FBHPartners will cooperate with law enforcement authorities as allowable in connection with the investigation and prosecution of any member of the FBHPartners community who violates a law governing the activities of FBHPartners.

FBHPartners' Standards of Conduct are:

- **Support the Mission of FBHPartners.**
The FBHPartners community shall support the mission of the organization to improve the quality of life and foster the mental health of members and their families covered by Medicaid and eligible for our services.

- **Avoid Conflict of Interest and Disclose Any Potential Conflict of Interest.**
A conflict of interest arises when an individual has a financial or other interest that could influence his or her judgment or actions on behalf of FBHPartners. Employees and Board members annually complete a Potential Conflict of Interest form in which they: 1) affirm that they have no conflict of interest, or 2) indicate a potential conflict of interest and provide an explanation.

FBHPartners will not engage in any business activity or practice or maintain any relationships which conflict in any way with the full performance of our contractual obligations. We recognize that the appearance of a conflict of interest in governmental contracting is harmful to the interests of HCPF. In the event of any uncertainty, we will submit a disclosure statement to HCPF. No employee, officer or agent of FBHPartners or its subcontractors or sub-grantees shall participate in the selection, award or administration of a contract or subcontract supported by federal funds if a conflict of interest, real or apparent, is involved.

- **Comply With Local, State and Federal Laws and Regulations that Govern our Business Activities.**

The FBHPartners community shall uphold all applicable local, state and federal laws and regulations which govern the conduct of the organization's business activities. Employees and Board members must be aware of the legal requirements and restrictions applicable to their respective positions, duties and roles. Questions about the legality or propriety of any

actions should be directed to the FBHPartners Corporate Compliance Officer (CCO) whose name and contact information is on the cover page of this document. A confidential telephone Hotline (Compliance Hotline) is also available by dialing 303 432-5985. ***Any person who reports a violation or suspected violation of this Corporate Compliance Program is protected by law from retaliation.*** The FBHPartners community shall ensure that no Federal funds are expended for lobbying activities and that any non-Federal funds used to purchase lobbying are reported to the CCO.

- **Conduct All Business With Honesty and Integrity.**

All business practices of FBHPartners shall be conducted with honesty and integrity and in a manner that promotes FBHPartners' reputation with clients, service providers, competitors and the communities we serve. The FBHPartners community shall:

- Follow proper and legally accepted business practices regarding 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.
- Conduct all activities in accordance with the highest ethical standards of the community and their respective professions.
- Conform to all applicable antitrust laws and regulations, and ensure that FBHPartners does not violate laws and regulations with respect to: 1) pricing or other sale terms or conditions, 2) improper sharing of competitive information, or 3) the unlawful exclusion of others from economic activities.
- Maintain and protect the property and assets of FBHPartners, including intellectual property and proprietary information, equipment and supplies, and funds of FBHPartners, and refrain from converting FBHPartners' assets to personal use.
- Maintain the confidentiality of proprietary information belonging to other persons or entities doing business with FBHPartners.
- 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 of FBHPartners' business transactions.

- **Maintain a Relationship of Integrity With Respect to Payment for Services and Comply with the Federal False Claims Act.**

The FBHPartners community shall ensure that: 1) all requests for payment for services are reasonable, necessary and appropriate, 2) services are provided by properly qualified persons working within their scope of practice, 3) the claims for such services are billed in the correct amount and supported by appropriate documentation, 4) all claims submitted are in compliance with the False Claims Act.

In the conduct of its business, FBHPartners is committed to the prevention and identification of Fraud, Waste and Abuse,

- **Fraud** is the 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/her or some other person. It includes any act that constitutes fraud under applicable Federal or State law.
- **Waste and Abuse** include practices that: 1) are inconsistent with sound fiscal, business

or medical practices, and that result in an unnecessary cost to the Medicaid program, 2) seek reimbursement for goods or services that are not medically necessary or that fail to meet professionally recognized standards for healthcare, or 3) result in the incorrect, improper or excessive utilization of medical care and services which are not medically necessary, at the recipient's insistence or request.

The **Federal False Claims 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.
- 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 False Claims Act permits the Federal Government to bring civil actions 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 also provides that private persons who bring civil actions for violations of the False Claims Act on behalf of the federal government are protected from retaliation (“whistleblower protection”) and are entitled to receive percentages of monies obtained through settlements, penalties, and/or fines collected. FBHPartners may not discharge, demote, suspend, threaten, harass, or in any other manner, discriminate against individuals reporting violations of the False Claims Act. Furthermore, individuals are entitled to reinstatement with seniority, double back pay, interest, special damages, and attorney’s fees and costs sustained as a result of discriminatory treatment.

The FBHpartners community has an affirmative obligation to report any potential and/or suspected violations of the False Claims Act or incidents of Medicaid fraud, waste and abuse. To report a potential or suspected violation:

- Contact the Corporate Compliance Officer (CCO) at the phone number or email address listed on the cover page of this document,
or
- Call the FBHPartners confidential Compliance Hotline at (303) 432-5985.

The CCO will conduct an investigation of all reported incidents as outlined in the **Reporting, Investigation and Monitoring Element** of this Compliance Program.

- **Maintain the Appropriate Levels of Confidentiality and Protection of Protected Health Information of Medicaid members.**

Employees, Board members and other members of the FBHPartners community may have access to protected health information of Medicaid members, the confidentiality of which must be protected. FBHPartners is bound by all applicable federal laws and regulations

regarding confidentiality, including HIPAA and HITECH, as well as all applicable state confidentiality laws and regulations. Protected Health Information of members shall be maintained securely and released only as authorized and permitted by law.

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

FBHPartners serves its Medicaid members without regard to age, race, color, nationality or ethnic origin, religion, gender, sexual orientation, disability or veteran's status. We respect the dignity of each individual in the community and will not tolerate discrimination in any form.

2. Program Oversight

Corporate Compliance Officer (CCO)

The FBHPartners CCO is responsible for overseeing the Corporate Compliance Program and is a Director-level position. The Chief Executive Officer (CEO) recommends the appointment of the CCO to the Board of Managers, which approves the recommendation and recommends that the Board of Directors appoint that individual as CCO. The CCO has direct access to the Board of Managers, the Board of Directors, and FBHPartners' legal counsel.

The CCO's duties are to:

- Develop and maintain policies and procedures regarding the implementation of the Compliance Program.
- Oversee and monitor FBHPartners' compliance activities.
- Chair the FBHPartners Corporate Compliance Committee (CCC) and call meetings to report or consult with Committee members as needed, but at least twice a year.
- Ensure that the Compliance Program is revised to reflect any changes to federal and state health care laws and regulations and changes to FBHPartners' contract with the State of Colorado on behalf of HCPF.
- Provide training to new employees and Board members and provide annual refresher training for all employees and Board members.
- Ensure that employees and Board members understand that they have an affirmative obligation to report suspected fraud or compliance issues to the CCO and that Federal law prohibits any form of retaliation for making such a report in good faith—even if the concern is determined to be unfounded on investigation by the CCO.
- Provide a communication system whereby employees and Board members can report any concern or impropriety in regards to the Compliance Program and Standards of Conduct. This system shall include being visible, affirming the commitment of the organization to corporate compliance, providing a form on which reports can be submitted, and maintaining and monitoring an anonymous Compliance Hotline.
- Report on a periodic basis to the CEO on matters related to Corporate Compliance.
- Report to the Board of Managers and Board of Directors on matters related to Corporate Compliance at least annually or as needed or requested.
- Assist the CEO, the CCC, the Board of Managers and Board of Directors in developing procedures to monitor FBHPartners' vulnerability to fraud and abuse.
- Assist the Director of Quality Improvement in establishing methods to improve FBHPartners' efficiency and quality of services.

- Ensure that independent contractors and agents who furnish mental health services to FBHPartners' Medicaid members are aware of the requirements of the Compliance Program with respect to coding, billing and marketing.
- Work closely with legal counsel to review and update the Standards of Conduct to reflect current federal, state and local laws.
- Receive and investigate reports of possible illegal conduct or other conduct that violates the Standards of Conduct.
- Independently investigate and act on matters related to compliance, including the flexibility to design and coordinate internal investigations, and any resulting corrective action plans for employees, Board members, or providers.
- Develop policies and procedures that encourage employees to report suspected fraud and other improprieties without fear of retaliation.
- Ensure that the Corporate Compliance Program is effectively communicated to all employees, Board members and other members of the FBHPartners community.
- Notify the appropriate law enforcement agencies of possible illegal misconduct after consultation with the CEO and legal counsel, as appropriate.
- Work with the Corporate Compliance Officers of the Partner Mental Health Centers on compliance issues relevant to FBHPartners' contract with the State of Colorado on behalf of HCPF.
- Serve as a member of the Corporate Compliance Committees of the Partner Mental Health Centers.

Corporate Compliance Committee

The CCO shall appoint an FBHPartners Corporate Compliance Committee (CCC), which includes, at a minimum: the FBHPartners CCO, Quality Improvement Director, Medical Director, Chief Financial Officer and Member and Family Affairs Director; and the Corporate Compliance Officers of the Partner Mental Health Centers and ValueOptions.

The CCC advises the CCO in the development, implementation and monitoring of the Compliance Program, including:

- Monitoring changes in the health care environment, including regulatory changes with which FBHPartners 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 Compliance Program and Standards of Conduct.
- Reviewing corporate compliance manuals, guides, training materials and making recommendations to the CCO on best use.
- Providing guidance to the CCO to ensure consistent Compliance Program actions for the FBHPartners community.
- Receiving reports from the CCO and helping identify trends or patterns, evaluating the adequacy of any investigations and resolutions, and providing guidance regarding investigations and resolutions.

3. Due Diligence in Hiring, Board Appointments and Delegation

FBHPartners practices due diligence to ensure that all activities of the FBHPartners community meet the requirements of the Compliance Program. To do so, FBHPartners ensures that: 1) criminal background checks are performed on all FBHPartners employees, officers, Board members, subcontractors and owners owning 5 (five) percent or more of the entity prior to employment, appointment or engagement; and 2) these same individuals or entities are checked initially and monthly against the Federal Office of Inspector General List of Excluded Individuals/Entities (LEIE) to ensure that they are not excluded from participating in procurement or non-procurement activities under federal acquisition regulation.

As part of their hiring, contracting or appointment process, Partner Mental Health Centers (PMHCs) are required to conduct: 1) criminal background checks and checks against the LEIE for all employees, Board members, directors, officers, contractors, consultants, or others with arrangements for the provision of items and services that are significant and material to the performance of their contracted duties, and 2) a thorough credentialing process for licensed staff. On a monthly basis, PMHC's must check all non-provider staff, officers and Board members against the LEIE.

ValueOptions, which is delegated the responsibility for managing the FBHPartners Provider Network, conducts a thorough credentialing process for all providers in the Independent Provider Network (IPN). This includes verifying that new providers are not on the LEIE list. On a monthly basis, ValueOptions checks FBHPartners' providers (licensed and unlicensed PMHC providers and IPN providers) against the LEIE.

4. Training and Education of Employees, Board Members and Providers

All FBHPartners employees and Board members shall receive training on the Compliance Program upon employment or affiliation with FBHPartners. As part of the training, they receive a copy of the Compliance Program and sign a statement acknowledging that they have received the training and are responsible for becoming familiar with the Program. The FBHPartners Employee Handbook also requires adherence to the Compliance Program and the Standards of Conduct. Employees and Board members also receive an annual refresher training on the Compliance Program which is documented by their signing a statement acknowledging receipt of the annual training. Special compliance trainings may be provided throughout the year on as-needed basis.

FBHPartners requires that the PMHCs: 1) have a Corporate Compliance Program based on the Seven Elements of the Federal Sentencing Guidelines, and 2) provide initial and annual trainings on the PMHC's Compliance Program to all staff and Board members and special trainings throughout the year as needed. Provider Mental Health Center Corporate Compliance Officers provide a report on these activities annually, at a minimum, to the FBHPartners CCC.

Finally, FBHPartners requires that ValueOptions, an equity owner and delegated Provider Network manager, have: 1) a Corporate Compliance Program based on the Seven Elements, 2) initial and annual corporate compliance trainings of employees and officers, 3) initial and annual compliance training of the Independent Provider Network (IPN). Annually, at a minimum, the

Corporate Compliance Officer of ValueOptions provides a report on these activities to the FBHPartners CCC.

5. Reporting, Investigation and Monitoring

The FBHPartners community is required to uphold the Standards of Conduct and the Compliance Program and to report any suspected violations. The CCO will investigate all reports of suspected violations as described below. Monitoring systems are in place to alert the CCO, the CEO and the CCC where there is the potential for fraud or abuse.

- **Reporting Mechanisms**

FBHPartners recognizes that an open line of communication between the CCO and employees and other members of the FBHPartners community is critical to the success of the Program. Employees and others are required to report incidents of potential fraud and encouraged to seek clarification regarding any legal or ethical concerns by contacting the CCO at the phone number or address on the cover page of this document.

A confidential and anonymous Compliance Hotline is also available for employees or other members of the FBHPartners community to call to report of any violation(s) of the Standards of Conduct or Compliance Program. The Compliance Hotline number is **303 432-5985**.

The CCO keeps a record of all Hotline calls and compliance issues, the results of any investigations, corrective action plans, and continued monitoring. At least twice a year, the CCO provides a report to the CEO and the CCC summarizing all compliance issues and Hotline calls and identifying any trends or patterns. Annually, or more frequently as requested or needed, the CCO provides a compliance report to the Board of Managers and Board of Director summarizing any compliance issues and Hotline calls, the results of any investigations and corrective actions plans and monitoring efforts, and any trends or patterns.

- **Prohibition against Retaliation for Reporting**

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 Claims 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 reports and communications with the CCO 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.

- **Investigation of Reported Fraud or Abuse or Violations of the Standards of Conduct**

The CCO shall promptly initiate an investigation of all reported compliance issues to determine if a violation has occurred. The CCO has direct access to the Board of Managers, Board of Directors, and legal counsel at any time, without first going to the CEO, and has full authority and responsibility to investigate any potential compliance issue and to direct others to do so as appropriate. The CCO will either personally conduct the investigation or refer the complaint to a more appropriate area within FBHPartners or outside, such as internal or outside legal counsel, auditors or health care consultants with needed expertise. When appropriate and as time permits, the CCO may seek advice and guidance from the CCC. The CCO may also request assistance in the investigation from the person or persons who filed a complaint.

According to FBHPartners' policies and procedures, the CCO and CEO shall notify HCPF of a compliance issue within the timeframes established in the contract between FBHPartners and the State of Colorado.

If a compliance issue involves potential Fraud or Abuse, the CCO will immediately notify the CEO and may consult with legal counsel. If necessary, the CCO may go directly to the Board of Managers or Board of Directors and legal counsel, rather than first notifying the CEO. The CCO will conduct an initial investigation and report the findings of the initial investigation to the CEO, or the Boards, as necessary, and may consult with legal counsel. If the initial investigation reveals that Fraud or Abuse has occurred or that further investigation is warranted, the CCO and the CEO, or the CCO and the Chair of the Board of Managers, shall consult with legal counsel and determine if the issue should be referred to the Special Investigations Unit (SIU) of ValueOptions, or to another outside expert. The FBHPartners CCO is the liaison to the SIU.

If the issue is referred to the SIU, the SIU reports back to the FBHPartners CCO, who may request legal counsel to participate in the investigation and provide legal advice in any such matter. In any investigation involving legal counsel, the fact-gathering is to be conducted under counsel's direction and control.

When the CCO notifies the CEO of a potential Fraud or Abuse issue, the CCO and CEO shall immediately notify HCPF verbally of the suspected Fraud or Abuse. Following an investigation of the concerns or suspicions, the CCO or CEO shall submit an initial written report of the findings to HCPF within three (3) business days of the initial notification. Within fifteen (15) business days of the initial notification, the CCO or CEO shall submit a final written report to HCPF. The HCPF contract manager may approve an extension of time for the final report upon showing of good cause. The CCO and CEO shall also report violations of criminal, civil or administrative law to the appropriate federal and/or state authority, including but not limited to, the Colorado Medicaid Fraud Control Unit, within the timeframe required by federal regulations, after determining that there is credible evidence of such violation.

The CCO will maintain a log of each suspected or reported violation of the Compliance Program, including investigations of Fraud and Abuse. The log shall 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. At least twice a year the CCO shall provide a written, summary report to the CEO and the CCC summarizing all compliance issues and identifying any trends or patterns. The report shall also be presented to the Board of Managers and the Board of Directors on an as needed basis, but not less than annually.

Monitoring Systems

Oversight and monitoring of the Compliance Program is the responsibility of the CCO, assisted by the CCC. The CCO maintains progress reports of ongoing monitoring activities, including identification of suspected noncompliance, and shares this information with the CEO, the CCC and the Board of Managers and Board of Directors, as appropriate.

Partner Mental Health Centers and ValueOptions are required to annually provide a report to the FBHPartners CCO and CCC of required trainings of employees, providers, and Board Members regarding Corporate Compliance, including the False Claims Act. Additionally, they are required to annually report the results of initial and monthly verification that employees, providers and Board members are not on the federal exclusions list (LEIE).

Additional monitoring strategies may include:

- Compliance audits focused on those areas within FBHPartners that have potential exposure to government enforcement actions as identified in: 1) Special Fraud Alerts issued by the Office of Inspector General (OIG), 2) the OIG annual work plan, 3) initiatives or requests from HCPF, and 4) 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 of the FBHPartners Compliance Program and Standards of Conduct to identify any needed revisions.
- Subsequent reviews to ensure that any Corrective Action Plans (CAPs) have been effectively and completely implemented.

6. Enforcement of Standards (Disciplinary Systems)

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

Corrective Action Plans may require that compliance issues be handled in a certain way, that relevant training takes place, that restrictions be imposed on particular employees, or that the matter be disclosed externally. Sanctions or disciplinary actions in accordance with FBHPartners' disciplinary policies and procedures may also be recommended. The CCO monitors that each CAP is implemented.

7. Prompt Response to Detected Offenses

FBHPartners will take prompt action regarding any employee, officer, Board member, equity owner, network provider or contractor who is found to have violated the FBHpartners Compliance Program or Standards of Conduct. For employees, disciplinary actions, up to and including termination, will be determined on a case-by-case basis and will be applied appropriately, equitably and consistently, given the underlying circumstances and the degree of negligence or reckless conduct.

Disciplinary actions and sanctions against all other members of the FBHPartners community will be as appropriate and applicable under the terms and conditions of the business or contractual relationship of the individual with FBHPartners. Sanctions may include a requirement for a CAP.

In the event that a member of the FBHPartners community is found to be on the LEIE, the CCO will immediately notify HCPF and legal counsel to determine appropriate steps, which may include termination of the relationship.

All violations of the FBHPartners Compliance Program or Standards of Conduct will be reported to HCPF and other appropriate federal or state authority as outlined in the **Reporting, Investigations and Monitoring Element** above.