

Policy and Procedure		
SUBJECT: Medicare Advantage Plans Standards of Conduct and Policies and Procedures	DEPARTMENT: Regulatory Compliance, Risk Management and Government Affairs	
ORIGINAL EFFECTIVE DATE: 01/11	DATE(S) REVIEWED/REVISED: 05/12, 03/14, 12/15, 09/16, 12/17, 09/18, 05/19, 04/20, 04/21, 06/22, 03/23	
APPROVED BY: Chief Compliance and Risk Officer	NUMBER: RA 65	PAGE: 2 of 2

SCOPE:

Providence Health Plan, Providence Health Assurance, Providence Plan Partners, and Ayin Health Solutions as applicable (referred to individually as “Company” and collectively as “Companies”).

APPLIES TO:

<u>Fully Insured</u>			<u>Self-Insured</u>	<u>Medicare</u>	<u>Medicaid</u>	<u>Delegated Services to Ayin</u>
<u>Individual</u>	<u>Small Group</u>	<u>Large Group</u>				
<input type="checkbox"/> Oregon On Exchange	<input type="checkbox"/> Oregon On Exchange (SHOP)	<input type="checkbox"/> Oregon	<input type="checkbox"/> ASO	<input checked="" type="checkbox"/> Medicare	<input type="checkbox"/> Medicaid	<input type="checkbox"/> YCCO
<input type="checkbox"/> Oregon Off Exchange	<input type="checkbox"/> Oregon Off Exchange (SHOP)	<input type="checkbox"/> Washington	<input type="checkbox"/> PBM			<input type="checkbox"/> WHA
<input type="checkbox"/> Washington Off Exchange						
<input type="checkbox"/> APPLIES TO ALL ABOVE LINES OF BUSINESS						

POLICY:

Company will maintain written policies, procedures, and standards of conduct that describe the organization’s commitment to comply with all applicable Federal and State standards and compliance expectations.

PROCEDURE:

All caregivers and first tier, downstream and related entities are expected to comply with all written policies, procedures, and Standards of Conduct. This is done in accordance with Companies policies.

The Medicare Advantage Plan’s Standards of Conduct is a separate Medicare specific document that is a companion document to the Providence Code of Conduct. The document includes the

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Company's commitment to comply with all applicable Federal and State laws; our commitment to conduct business with the highest ethical standards; procedures to avoid and address conflicts of interest; and our procedures for Fraud, Waste and Abuse (FWA) prevention, detection, and correction. The Standards of Conduct document communicates to caregivers and FDRs that compliance is everyone's responsibility. It describes Companies compliance expectations of caregivers and FDRs; the operational procedures and implementation of our Compliance Program; provides guidance to caregivers and FDRs on dealing with potential compliance issues; informs caregivers and FDRs on how to communicate compliance issues to an appropriate caregiver; and includes a description of the investigation and resolution process for potential non-compliance issues. Company clearly outlines the expectation that all caregivers, FDRs, management, and governing body report violations of law, regulations, or CMS requirements to the Company. In addition, the Standards of Conduct document specifies that disciplinary actions will be imposed for violation of law and ethics, Medicare program non-compliance, and FWA.

For Caregivers:

- All caregivers have access to approved policies and procedures posted on Quickbase. Quickbase is a web-based application which houses all Company policies and procedures. All caregivers also have access to the Standards of Conduct posted on the RCRMGA intranet page, which also provides methods on reporting fraud, waste and abuse and non-compliance concerns.

For FDR's:

- All FDR's have access via a link to approved policies and procedures and standards of conduct posted on the FDR Website located at <https://www.providencehealthplan.com/searchresults?searchRequest=%7B%22term%22%3A%22FDR%22%7D>. This website also provides methods on reporting fraud, waste and abuse and non-compliance concerns.

Written policies, procedures and standards of conduct are reviewed at a minimum on an annual basis by the RCRMGA department and are updated as necessary to incorporate any changes in applicable laws, regulations and other requirements.

REFERENCES:

42 CFR §422.503(b)(4)(vi) and §423.504(b)(4)(vi), Chapter 9 of the Medicare Prescription Drug Manual, Chapter 21 Medicare Managed Care Manual, Compliance Program Guidelines