

<b>RESPONSIBLE DEPARTMENT: Corporate Compliance</b>	<b>SUBJECT: Compliance Policy, Procedure Development, &amp; Review</b>
<b>NUMBER OF PAGES: 2</b>	<b>REPLACES POLICY: 03/2023</b>
<b>EFFECTIVE DATE: AUGUST 2024</b>	<b>POLICY ID. ADM-CC</b>

<p><b>SCOPE:</b> This policy applies to all Corporate Compliance Program Polices and Procedures</p>
<p><b>PURPOSE:</b> The purpose of this policy is to establish the mechanism for development, implementation, evaluation and revision as necessary of policies and procedures for matters that pose a risk of noncompliance with laws, regulations and standards of business and ethical practice embodied in CMH’s Code of Conduct and Corporate Compliance Program.</p>
<p><b>POLICY STATEMENT:</b> It is the policy of Community Memorial Hospital to have policies and procedures in place to address issues related to compliance with laws and regulations pertaining to its corporate business practices, including those pertaining to the development, implementation and evaluation of Community Memorial Hospital’s Corporate Compliance Program’s policies and procedures.</p>
<p><b>PROCEDURE:</b> The following applies:</p> <ul style="list-style-type: none"> <li>A. Compliance policies and the Corporate Compliance Handbook will be reviewed at least annually to determine: <ul style="list-style-type: none"> <li>a. If they have been implemented;</li> <li>b. Whether affected individuals are following them;</li> <li>c. Whether they are effective; and</li> <li>d. Whether any updates are required.</li> </ul> </li> <li>B. The Compliance/Revenue Cycle Committee shall discuss and shall hear presentations on an as needed basis on policies and procedures relevant to the Corporate Compliance Program, the Code of Conduct and the Compliance Training Plan.</li> <li>C. The Compliance/Revenue Cycle Committee is authorized to make technical changes to the Corporate Compliance Handbook, policies and procedures and the Compliance Training Plan.</li> <li>D. To the extent a new Corporate Compliance policy or an amendment to an existing policy is deemed by the Compliance/Revenue Cycle Committee to materially modify the Corporate Compliance Program, the Committee shall submit such amended policy to the CMH Board of Directors for review and approval.</li> </ul>
<p><b>DEFINITIONS: N/A</b></p>
<p><b>REFERENCES:</b></p> <ul style="list-style-type: none"> <li>• NYS OMIG Mandatory Provider Compliance Plan, 18 NYCRR § 521. OMIG’s website is: <a href="https://omig.ny.gov/compliance/compliance">https://omig.ny.gov/compliance/compliance</a></li> <li>• Office of Inspector General. (2005). OIG Supplemental Compliance Program Guidance for Hospitals (Federal Register Vol. 70, No. 19). Retrieved from <a href="https://oig.hhs.gov/fraud/docs/complianceguidance/012705HospSupplementalGuidance.pdf">https://oig.hhs.gov/fraud/docs/complianceguidance/012705HospSupplementalGuidance.pdf</a></li> </ul>

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- Practical Guidance for Health Care Governing Boards on Compliance Oversight  
<https://oig.hhs.gov/compliance/compliance-guidance/docs/Practical-Guidance-for-Health-Care-Boards-onCompliance-Oversight.pdf>

Approved by:



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