



WRITTEN POLICIES AND PROCEDURES POLICY

PURPOSE

Jewish Home of Central New York, Inc., Menorah Park Group Residences, Inc., and Syracuse Jewish Family Services, Inc. (collectively, the “Organization”) intend to comply with all federal and state laws, regulations, and standards that apply to their operations, including the requirement to maintain written policies, procedures, and Standards of Conduct applicable to its Corporate Compliance Program (the “Compliance Policies”). The purpose of this Policy is to establish procedures for drafting, reviewing, and revising the Compliance Policies.

APPLICABILITY

This Policy applies to all employees, Board members, and contractors of the Organization.¹

POLICY

The Organization shall have written Compliance Policies which shall be available, accessible, and applicable to all employees, Board members, and contractors. The Compliance Officer, in coordination with the Compliance Committee, is responsible for drafting, reviewing, and revising the Organization’s Compliance Policies on at least an annual basis, and more frequently when changes are required. The Compliance Committee, CEO, and Board are responsible for approving the Organization’s Compliance Policies.

PROCEDURE

1. Compliance Policies.

The Organization’s Compliance Policies shall be available, accessible, and applicable

¹ “Employees, contractors, and Board members” includes the Organization’s employees, Chief Executive Officer (“CEO”), senior administrators, managers, volunteers, interns, contractors, agents, subcontractors, independent contractors, corporate officers, and Board members who are affected by the Organization’s Compliance Risk Areas. “Compliance Risk Areas” are those areas of operation affected by the Organization’s Compliance Program, as set forth in Section XIII of the Organization’s Compliance Plan. For purposes of the Organization’s Compliance Program, “contractors” includes contractors, agents, subcontractors, and independent contractors who are affected by the Organization’s Compliance Risk Areas. Contractors are required to comply with the Organization’s Compliance Program to the extent that the contractor is affected by the Organization’s Compliance Risk Areas, and only within the scope of the contractor’s contracted authority and affected Compliance Risk Areas.

to all employees, Board members, and contractors. The Compliance Policies shall:

- a. Articulate the Organization's commitment and obligation to comply with all applicable federal and state laws, rules, regulations, guidance and other standards;
- b. Identify governing laws and regulations applicable to the Organization's Compliance Risk Areas, including any applicable Medicaid Program policies and procedures for its categories of service;
- c. Describe the Organization's compliance expectations as embodied in its Standards of Conduct, which shall serve as a foundational document which describes the Organization's fundamental principles and values, and commitment to conduct its business in an ethical manner;
- d. Document the implementation of each of the requirements set out in applicable laws, rules, and regulations, and outline the Organization's ongoing operation of its Compliance Program;
- e. Describe, at a minimum, the structure of the Organization's Compliance Program, including the responsibilities of all employees, Board members, and contractors in carry out the Compliance Program's functions;
- f. Provide guidance to employees, Board members, and contractors on dealing with potential Compliance Issues,² including assisting employees, Board members, and contracts in identifying potential Compliance Issues, questions and concerns, expectations for reporting Compliance Issues, and how to report Compliance Issues, questions, and concerns to the Organization's Compliance Officer;
- g. Establish the Organization's expectation that all employees, Board members, and contractors will act in accordance with its Standards of Conduct, must refuse to participate in illegal or unethical conduct, and must report unethical or illegal conduct to the Compliance Officer;
- h. Identify the methods and procedures for communicating Compliance Issues to the Compliance Officer and other appropriate parties at the Organization;
- i. Describe how potential Compliance Issues are investigated and resolved by the Organization, and the procedures for documenting the investigation and the resolution or outcome;

² "Compliance Issues" include issues involving actual or potential fraud, waste, abuse, and other wrongful or unethical conduct and violations of law, rules, regulations, policies, and standards, or the Organization's Compliance Plan, Compliance Program, policies, procedures, and Standards of Conduct.

- j. Include a policy of non-intimidation and non-retaliation for good faith participation in the Compliance Program, including, but not limited to reporting potential Compliance Issues to the Compliance Officer or other appropriate parties at the Organization, participating in investigations of potential Compliance Issues, self-evaluations, audits, remedial actions, reporting instances of intimidation or retaliation, and reporting potential fraud, waste, or abuse to the appropriate State or Federal entities;
- k. Set out the Organization's policy regarding employees, Board members, and contractors who fail to comply with the Compliance Policies and State and Federal laws, rules, and regulations; and
- l. Set out detailed information about the False Claims Act, Federal administrative remedies for false claims and statements, New York State laws pertaining to civil and criminal penalties for false claims and statements, and whistleblower protections under applicable laws, as well as detailed provisions related to detecting and preventing fraud, waste, and abuse.

2. Drafting the Compliance Policies.

The Organization's Compliance Officer will be responsible for drafting the Compliance Policies. The Compliance Officer may delegate these duties to other appropriate personnel of the Organization, as well as to outside attorneys and consultants, as necessary and appropriate. In all instances, the Compliance Officer will remain responsible for overseeing the drafting of the Compliance Policies. The Organization's Compliance Committee will also be responsible for coordinating with the Compliance Officer to ensure that the Compliance Policies are current, accurate, and complete. A record of the implementation dates of the individual Compliance Policies will be maintained by the Compliance Officer.

3. Reviewing and Revising the Compliance Policies.

The Organization's Compliance Officer will be responsible for reviewing and revising the Compliance Policies. The Compliance Officer, in consultation with appropriate personnel and legal counsel, as necessary, will determine whether the Compliance Policies should be revised based on changes to the Organization's Organizational Experience³ and/or changes to federal and state laws, rules regulations, policies, and standards.

The Compliance Officer may delegate these duties to other appropriate personnel of the Organization, as well as to outside attorneys and consultants, as necessary and appropriate. In all instances, the Compliance Officer will remain responsible for overseeing

³ "Organizational Experience" means the Organizations: (1) knowledge, skill, practice, and understanding in operating its Compliance Program; (2) identification of any issues or risk areas in the course of its internal monitoring and auditing activities; (3) experience, knowledge, skill, practice, and understanding of its participation in the Medicaid Program and the results of any audits, investigations, or reviews it has been the subject of; or (4) awareness of any issues it should have reasonably become aware of for its category or categories of service.

the reviewing and revising of the Compliance Policies. The Organization's Compliance Committee will also be responsible for coordinating with the Compliance Officer to ensure that the Compliance Policies are current, accurate, and complete. A record of the revision dates of the individual Compliance Policies will be maintained by the Compliance Officer.

4. Approval of the Compliance Policies.

The Organization's Compliance Policies shall be reviewed and approved by the Compliance Committee, CEO, and Board. A record of the approval dates of the individual Compliance Policies will be maintained by the Compliance Officer.

5. Annual Review of the Compliance Policies.

The Organization's Compliance Policies shall be reviewed on at least an annual basis. The Compliance Officer, in coordination with the Compliance Committee, will be responsible for completing this annual review. The Compliance Officer may seek the assistance of attorneys and consultants, as necessary and appropriate, in completing the annual review of the Compliance Policies. The purpose of the annual review will be to determine whether:

- a. The Compliance Policies have been implemented;
- b. Employees, Board members, and contractors are following the Compliance Policies;
- c. The Compliance Policies are effective; and
- d. Any updates to the Compliance Policies are required.

The Compliance Officer will maintain documentation of the annual review of the Compliance Policies, including any updates to the individual Compliance Policies identified during the annual review.

6. Availability and Accessibility of the Compliance Policies.

The Organization's Compliance Policies shall be available and accessible to all employees, Board members, and contractors. The Compliance Policies will be published and disseminated to all employees, contractors, and Board members at hiring, appointment, or time of contracting, on at least an annual basis, and whenever changes to the Compliance Policies are made, and documentation of this distribution will be maintained by the Compliance Officer. Information on the Compliance Policies will also be incorporated into the Organization's compliance training and education program and compliance training plan. *See Compliance Training Policy.*

Adopted: _____, 2023