MISSION STATEMENT

Independent Living, Inc. (ILI) is a consumer-directed, cross-disability advocacy and service organization, dedicated to enhancing the quality of life for individuals with disabilities. Our vision is a barrier-free society with opportunities for all people to achieve their maximum potential.

This mission is accomplished by using a process of Continuous Quality Improvement in which systems are established to enhance the delivery of services to internal and external customers by setting standards and measuring outcomes on a regular basis.

I. INTRODUCTION

Independent Living, Inc. (ILI) is committed to providing quality services and to conducting its business lawfully and ethically. In order to do this, all of ILI’s employees, Members of the Board of Directors, Volunteers, Interns, Temporary Employees, and Contracted Agencies/Partners, who will be referred to hereafter in this document as “all ILI Associated parties”, must meet high professional standards of care and service and must also meet the highest standards of legal and ethical conduct. All applicable laws, rules, and regulations must be strictly followed at all times. These standards must be followed in dealing with recipients of ILI services and their families, other ILI staff, contractors, payers, vendors, and the general public. Violations of these standards jeopardize ILI’s ability to provide its services and the welfare of the agency and its staff.

All ILI Associated parties are required to understand and comply fully with the rules and procedures established by this Corporate Compliance Plan which includes the Conflict of Interest Statement, the False Claims Act and Whistleblower Policy, the Medicaid Fraud Prevention Policy, the Code of Conduct, the Personnel Guidelines, HIPAA Policies and Procedures and those policies and procedures regulated by Federal and New York State law and regulatory guidelines and those established by ILI. In case of any inconsistency, this Corporate Compliance Plan shall govern. Many of ILI’s policies overlap one another and can be found in any of the above-mentioned documents as well as other ILI policies not attached to this document, which can be found at the main office as well as all program sites.
This Corporate Compliance Plan and the policies and procedures of individual ILI programs are not meant to cover all situations. Any doubt whatsoever as to the propriety of the particular situation or action, whether or not the situation or action is described within this Corporate Compliance Plan, or in other ILI policies, should be submitted either to your immediate supervisor, to the Compliance Officer, any member of the Compliance Committee, or to the President of the Board of Directors. Claims of failure to understand or to be aware of these standards will not be accepted as excuses for non-compliance.

The intent of ILI’s Corporate Compliance Plan is to safeguard ILI’s services and to continue its tradition of strong moral, ethical and legal standards of conduct. Any ILI Associated party violating any provision of this Corporate Compliance Plan or other ILI policies will be subject to disciplinary action, up to and including discharge from employment.

Upon hire all ILI Associated parties, will be required to sign a Statement of Understanding of the Corporate Compliance Plan, and annually thereafter. Any ILI Associated party who refuses to sign the document will be subject to disciplinary action including termination.

II. COMPLIANCE COMMITTEE AND COMPLIANCE OFFICER

To assure uniformity in standards of conduct, ILI has established this Corporate Compliance Plan. Under the Corporate Compliance Plan, Compliance Officer and a Compliance Committee have been appointed to ensure adherence with the Corporate Compliance Plan, to serve as contacts for employees to clarify questions regarding this Corporate Compliance Plan, and to investigate reports of any violations of laws, regulations, or this Corporate Compliance Plan. The Corporate Compliance Committee shall meet on a quarterly basis, or within 30-days of a serious issue or violation.

The Compliance Committee is made up of ILI’s Executive Director, Chief Operating Officer (COO), Chief Fiscal Officer (CFO), Director of Human Resources, Director of Employment and Family Services, IT and Facilities Manager, Compliance Officer (Committee Chair), IHC Board representative and the ILI Board representative. Individual committee members can be reached via email, or voicemail. The e-mail addresses and numbers are posted at each site and in the agency directory.

The Executive Director, subject to the approval of the Board of Directors, appoints the Compliance Officer. The Compliance Officer reports to the Chief Operating Officer (COO). The COO reports directly to the Executive Director. The COO will report on compliance matters to both the Executive Director and the Board routinely. The Compliance Officer will report directly to the Board of Directors, twice annually or more if needed. The Compliance Officer shall receive reports 24 hours, 7 days a week via email, voicemail, US mail or direct contact in person or by phone during regular business hours.
III. CODE OF CONDUCT

A. ILI’S RESPONSIBILITIES TO YOU

• **It is ILI’s responsibility** to train all ILI Associated parties on this Corporate Compliance Plan, and policies and procedures relevant to each employee’s duties.

• **It is ILI’s responsibility** not to tolerate any act of intimidation, retaliation or retribution against an employee who makes a “good faith” report of a potential violation of law, regulation, standard, policy, or this Corporate Compliance Plan.

• **It is ILI’s responsibility** to discipline those who commit violations of any aspect of the Corporate Compliance Plan, up to and including termination.

• **It is ILI’s responsibility** to encourage each ILI employee in a supervisory role in their responsibility to create a work environment in which ethical concerns can be raised and will be addressed.

• **It is ILI’s responsibility** to monitor the effectiveness of the Corporate Compliance Plan and to modify the Plan as changes occur to laws, rules and regulations.

• **It is ILI’s responsibility** to employ properly credentialed individuals with the experience and supervision necessary to perform their duties.

• **It is ILI’s responsibility** to hire and retain qualified individuals without regard to race, color, religion, sex, sexual orientation, national origin, age, marital status, military status, or disability.

• **It is ILI’s responsibility** to screen all prospective employees to ensure that they have not been sanctioned by any regulatory agency and are eligible to perform their designated responsibilities.

• **It is ILI’s responsibility** to respect the privacy of our employees and treat salary, benefits, payroll, personnel files, and information on disciplinary matters as confidential information.

• **It is ILI’s responsibility** to show proper respect and consideration to all ILI associated parties regardless of position, and not to tolerate discriminatory treatment, sexual harassment and unlawful harassment of any kind.

• **It is ILI’s responsibility** to submit accurate and complete claims for all services provided and maintain appropriate documentation to support the claims.
• **It is ILI’s responsibility** to bill for services according to medical necessity guidelines established by the various payors.

• **It is ILI’s responsibility** to train and continually educate staff responsible for coding and billing functions.

• **It is ILI’s responsibility** to notify payors of payment errors and process refunds promptly and accurately.

• **It is ILI’s responsibility** to establish internal controls to ensure the accuracy of financial statements and all other records and reports.

**B. RESPONSIBILITIES OF SUPERVISORS AND MANAGERS**

• **It is your supervisor’s responsibility** to set the tone and maintain a work environment that encourages ethical and responsible behavior and to establish an environment in which employees feel comfortable addressing compliance issues without fear of reprisal.

• **It is your supervisor’s responsibility** to discuss the Corporate Compliance Plan regularly and to encourage questions from all ILI Associated parties and your fellow employees.

• **It is your supervisor’s responsibility** to evaluate all ILI Associated parties adherence to the Corporate Compliance Plan as part of the annual performance review.

**C. RESPONSIBILITIES AS AN ILI ASSOCIATIED PARTY**

• **It is your responsibility** to comply with the Corporate Compliance Plan and to know and follow all the rules and regulations that govern your job.

• **It is your responsibility** to devote your full time and ability to ILI during working hours.

• **It is your responsibility** to report any actual or potential violations of the law, this Corporate Compliance Plan, or ILI policies and procedures. Reports may be made to your supervisor, the Corporate Compliance Officer, any member of the Corporate Compliance Committee, via voicemail, e-mail or may be sent through the U.S. mail. Reports may be made anonymously, if you wish. All reports will be kept confidential to the extent practicable, unless ordered for release by a judge. ILI’s non-intimidation/non-retaliation policy, which is in compliance with Federal and State Whistle Blower laws, prevents any adverse action from being taken against anyone who makes good faith reports.
• **It is your responsibility** to submit accurate, complete, and truthful records of your work, including any written documentation needed to support the services you provided.

• **It is your responsibility** to treat your fellow employees and each recipient of ILI services with respect, dignity, patience and kindness and to never discriminate against or harass anyone on the basis of race, religion, sex, age, national origin, sexual orientation or affection, or disability.

• **It is your responsibility** to maintain the confidentiality of recipient information and information related to ILI business operations at all times, including off-duty hours. This responsibility extends past the end of your employment with ILI.

• **It is your responsibility** to refrain from giving or accepting any form of gift or gratuity that might influence, or appear to influence, another person’s judgment in the performance of his or her job duties.

• **It is your responsibility** to refrain from offering or receiving anything of value to induce another person to purchase an item or service from ILI, to refer a person to ILI, or to market ILI’s products or services.

• **It is your responsibility** to refrain from contributing or donating ILI’s funds, products, services or other resources to any political party or candidate.

• **It is your responsibility** to refrain from making misrepresentations, dishonest statements, or statements intended to mislead or misinform individuals about the quality of ILI’s services or those of a competitor.

• **It is your responsibility** to refrain from using ILI property or services for personal gain or benefit; you may not remove or dispose of ILI materials, supplies or equipment without proper authority.

• **It is your responsibility** to respect the privacy of your fellow employees and treat information you may have on salary, benefits, payroll, personnel files, and disciplinary matters confidentially.

• **It is your responsibility** to ensure that confidential and proprietary information is carefully maintained and managed to protect its value.

• **It is your responsibility** to comply with local, state, and federal regulations regarding government contracts and programs in which ILI participates.

• **It is your responsibility** to tell the truth and assist in the investigation and resolution of a potential compliance or other legal matter, whether investigated by ILI representatives or government authorities.
• **It is your responsibility** to use ILI equipment appropriately and to take measures to prevent unexpected loss of equipment, supplies, materials or services.

D. OUR RESPONSIBILITIES TO THE CONSUMERS OF ILI SERVICES

Providing high quality care and services is a primary objective of ILI. Whether an individual has direct service responsibilities or an indirect impact on services, this commitment to serving the needs and best interests of those who come to us for services should guide all business decisions. In discharging these responsibilities, the safety and well-being of each person we serve must be given the highest considerations.

*Each consumer of ILI services shall be* treated as an individual, with respect given to his or her dignity, autonomy, and self-esteem, with the same high quality and cost effective treatment provided regardless of payment source or level of reimbursement. No distinction will be made in admission, movement, or discharge activities based on race, sex, religion, sexual orientation, age, disability, or national origin.

*Each consumer of ILI services shall be* assured that ILI complies with all Federal, State, county and local government laws and regulations regarding recipient rights, including the right to participate in their care; the right to freedom of choice in decisions regarding services, their provision and anticipated cost; the right to receive full and accurate information regarding the proposed service/treatment; the right to give informed consent to such service/treatment; and the right to maintain confidentiality of their information.

E. ILI ASSOCIATED PARTY-CONSUMER CONDUCT

Professional conduct encourages an employee consumer relationship that establishes appropriate boundaries and promotes the well-being of the consumer. Qualities of a professional relationship include being trustworthy, respectful, cooperative, courteous, patient, tolerant, communicative, understanding, honest and accessible. All staff are expected to conduct themselves in a professional manner at all times.

For all ILI associated parties:

**It is your responsibility not to** accept purchased or personal gifts from consumers, former consumers, their family members or vendors. Any gift should be returned to the donor with an appropriate explanation. However, an item made by a consumer may be accepted by staff so long as acceptance of the gift is determined to be in the best interests of the consumer. Such determination is made by staff in consultation with his/her supervisor. Accordingly, all gifts received must be reported to the employee’s immediate supervisor. If family members wish to express gratitude to the staff, please suggest that they make a gift to the program or a contribution to the agency.

**It is your responsibility not to** establish relationships that extend outside of the normal consumer-worker relationship, or include any off-site contact with a consumer, a former
consumer, a consumer’s family member via telephone, e-mail, face-to-face contact or social networking.

**It is your responsibility not to** ask or instruct a consumer either expressly or implicitly, “not to tell” information regarding any situation.

**It is your responsibility not to** make promises to consumers about not sharing information a consumer provides to an employee. However, we maintain confidentiality in accordance with agency policy and procedures.

**It is your responsibility not to** have sexual relationships with a consumer, a former consumer, and/or a consumer’s family member.

**It is your responsibility not to** loan or give money or any personal items to a consumer, a former consumer, and/or a consumer’s family member.

**It is your responsibility not to** have consumers, former consumers and/or a consumer’s family member in our homes on or off grounds, or personal vehicles without obtaining prior authorization, whenever possible, from your Director.

**It is your responsibility not to** give a consumer, a former consumer, and/or a consumer’s family member our personal telephone number which may include, but not be limited to, cellular phone number, pager number, home or personal e-mail address and any other telephone numbers or means of access unrelated to ILI programs.

**It is your responsibility not to** personalize what consumers say or be judgmental toward consumers.

**It is your responsibility not to** share with consumers more than a minimal amount of information regarding your personal life.

**It is your responsibility not to** discuss another staff member’s personal situation or business with a consumer.

**It is your responsibility not to** leave confidential material or information where it can be viewed by consumers or any unauthorized person.

**It is your responsibility not to** break rules of confidentiality.

**It is your responsibility not to** dress inappropriately.

ILI Associated parties should address any and all questions related to the ILI Code of Conduct (A through E) to their manager, director and/or the Corporate Compliance Officer.

**IV. CONFLICT OF INTEREST**

All ILI Associated parties must avoid situations in which their personal interest could conflict or appear to conflict with their responsibilities, obligations or duties to ILI. In addition, individuals
must avoid situations that present opportunities for personal gain apart from the normal compensation provided through employment or other affiliation with ILI.

Any individual who believes he or she may have either a real or potential conflict of interest, or any supervisor who believes that he or she knows of an individual who may have a real or potential conflict of interest, must disclose any real or potential conflict to the Compliance Officer.

All ILI Associated parties are provided with the agency’s Conflict of Interest Policy and are required to complete a conflict of interest form and disclose any potential conflict of interest. Conflicts can be financial, personal relationships, status, or power. The agency’s Audit Committee shall be responsible for the oversight of the Conflict of Interest Policy.

- **Use of Corporate Funds and Assets.** All ILI Associated parties may not use assets of the organization for their own personal benefit or gain. All property and business of the organization shall be used in a manner designed to further ILI’s interest rather than the personal interest of an individual. Individuals are prohibited from the unauthorized use or taking of ILI equipment, supplies, software, data, intellectual property, materials or services. Further, individuals are prohibited from engaging in personal activities or business activities for anyone other than ILI during a scheduled workday.

- **Outside Financial Interests.** The following types of activities by individuals affiliated with or employed by ILI, household members of such individuals, or a member of the individual’s family may cause a conflict of interest:
  
  o Ownership in or employment by any outside concern that does business with ILI.
  o Representation of ILI by an individual in any transaction in which he or she or a household member has a substantial personal interest.
  o Disclosure or use of confidential, special or inside information of or about ILI, particularly for personal profit or advantage of the individual or a household member or family member or other.
  o Competition with ILI by an individual, directly or indirectly, in the provision of like services, the purchase, sale or ownership of property or property rights or interests, or business investment opportunities.

- **Personal Use of Agency Vendors:** ILI utilizes the services of various vendors. If an ILI Associated party wishes to contract with or purchase from an agency vendor, he or she must do so without any compromise to ILI. All ILI Associated parties are not to assume that they will receive a discount on services or commodities from an agency vendor. If an associated party has a legitimate complaint against an agency vendor, he or she must handle that complaint on his or her own. ILI cannot negotiate a disagreement with a vendor that an associated parties uses for his or her own personal use nor can ILI negotiate a discount on services for an associated parties personal use.
• **Outside Employment:** ILI staff may work at jobs in addition to their position at ILI as long as the following conditions are met:

  o The second job must not conflict with the staff member’s scheduled hours at ILI
  o The second job must not impact upon the job performance of the employee’s position at ILI
  o The second job may not be employment for a ILI vendor or any landlord if it would compromise the agency’s ability to negotiate fees, rents, etc.
  o The staff member must not derive any financial benefit due to their affiliation with ILI (ie: having a private practice consisting of one or more ILI consumers).

• **Outside Activities:** Individuals, with the permission of the Executive Director, may participate as faculty and speakers at educational programs and functions at the request of ILI. Salaried employees are prohibited from accepting compensation of gifts for activities occurring within their general work schedule. All compensation of gifts must be reported to the Corporate Compliance Officer and to the Executive Director. ILI retains the right to determine the appropriateness of a staff member accepting any compensation of gifts.

• **Participation on Boards of Directors/Trustees**

  o All ILI Associated parties must notify the Executive Director prior to serving as a member of the Board of Directors/Trustees of any organization whose interests may conflict with those of ILI. Should a conflict of interest arise, the employee is expected to excuse him/herself from discussion and action.
  o All ILI Associated parties who are asked, or who seek to serve on the Board of Directors/Trustees of any organization whose interest would not impact ILI (for example, civic, charitable, fraternal and so forth) are not required to obtain such prior approval.
  o All ILI Associated parties who serve on a Board of Directors may not share financial, business or policy information about ILI without the written permission of ILI.

• **Gifts and Gratuities:**

  o All ILI Associated parties may not accept gifts, gratuities or other items of value from consumers, their family, vendors, referral sources, etc. These gifts and/or gratuities may be interpreted as an inducement for services.
  o A small gift such as candy or cookies at holiday time may be appropriate.
  o Anonymous gifts or donations from family members to consumers in a specific program are acceptable as long as the consumers are unaware of the contributor. This is to dissuade issues of jealousy and competitiveness among consumers.

Any violation of this policy may be cause for disciplinary action up to and including
termination of employment.

- **Political Activities.** ILI funds and/or resources are not to be used to contribute to political campaigns or for gifts or payments to any political party or any of their affiliated organizations. Organization resources include financial and non-financial donations, such as using work time and telephones to solicit for a political party or candidate, or the loaning of ILI property for use in a political campaign. All ILI Associated parties who participate individually in the political process must be sure not to give the impression they speak on behalf of ILI.

From time to time, ILI may encourage all ILI Associated parties to make personal contact with government officials or to write a letter to present our position on specific issues. Employees making these communications on behalf of ILI should seek guidance from senior management and/or the Corporate Compliance Officer to ensure regulatory constraints are observed.

Any activity conducted on behalf of ILI in support of or against any political issue requires the approval of the Executive Director.

- **Transporting PHI off-Site**

PHI should be taken off-site only if absolutely necessary for job related reasons and should then only include the minimum amount necessary to complete your task. The person removing the information shall take all necessary precautions to protect and safeguard the PHI at all times while in their possession. This includes never leaving the PHI unattended even if in a locked vehicle. While off-site, the PHI will be the sole responsibility of the individual who removed it from the premises. The PHI should be returned to the provided secured container as soon as possible. When PHI is taken off site of ILI premises, the individual taking it off site must do so in the provided locking containers.

- **Viewing of Health Records**

Individuals’ Right under HIPAA to Access their Health Information 45 CFR § 164.524

“The regulations under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), which protect the privacy and security of individuals’ identifiable health information and establish an array of individual rights with respect to health information, have always recognized the importance of providing individuals with the ability to access and obtain a copy of their health information. With limited exceptions, the HIPAA Privacy Rule (the Privacy Rule) provides individuals with a legal, enforceable right to see and receive copies upon request of the information in their medical and other health records maintained by their health care providers and health plans” (www.HHS.gov).

All ILI associated parties, are prohibited from looking at their own health record maintained within an ILI program, without first completing the “Individual Request for Access to Protected Health Information (PHI)”. Once completed, the form must be submitted to the Corporate Compliance/Privacy Manager. If approval is given by the Corporate Compliance/Privacy
Manager, a copy of the requested record will be given to the ILI associated party in accordance with HIPAA and New York State Law. At no time may an ILI associated party access their own record even if a request for access has been previously granted. Usage of our electronic health record is audited and those found to be in violation may face disciplinary action up to and including termination.

Introduction
It is the intention of ILI/IHC to ensure the confidentiality and integrity of protected health information of both consumers and employees, as required by HIPAA, professional ethics and any other legal requirements. Employees including temporary and volunteers, are expected to follow the ILI/IHC policies, guidelines and standards for workforce performance expectations, which are mandated by HIPAA.

Protected Health Information Defined: “Protected Health Information” (PHI) includes any information that can possibly identify the particular consumer to which the information applies. This information can be written, verbal, or electronic.

Use and Disclosure of PHI
ILI/IHC will use and disclose PHI only as permitted under HIPAA. The terms “use” and “disclosure” are defined as follows:

- **Use.** The sharing, employment, application, utilization, examination, or analysis of individually identifiable health information by any person working for or within ILI or IHC, or by a business Associate of the company.

- **Disclosure.** For information that is protected health information, disclosure means any release, transfer, provision of access to, or divulging in any other manner of individually identifiable health information to persons not employed by or working within ILI/IHC with a business need to know PHI.

Access to PHIs is Limited to Certain Employees
All staff who performs functions directly on behalf of the ILI/IHC or on behalf of consumers will have access to PHI as determined by their department and job description. These employees with access may use and disclose PHI as required under HIPAA but the PHI disclosed must be limited to the minimum amount necessary to perform the job function. Employees with access may not disclose PHI unless an approved compliant authorization is in place and the use and disclosure procedures of HIPAA. Staff members may not access through either our medical records systems or the consumer’s medical records /demographic information for themselves, family members, friends, staff members or other individuals for personal or other non-work related purposes. The staff member must go through the proper channels to request their own PHI. In the very rare circumstances when a staff member’s job requires him/her to access and/or copy the medical information of a family member, or other personally known individual, then he/she should immediately report the situation to his/her manager who will determine whether to assign a different staff member to complete the task involving the specific consumer.
Your access to your PHI must be based on the same procedures available to other consumers not based on your job-related access to our medical records systems. You cannot access your own information; you must go through all the appropriate channels, as any consumer would have.

V: FALSE CLAIMS ACT AND WHISTLEBLOWER POLICY

Independent Living, Inc.
Whistleblower Policy

Introduction
Independent Living, Inc. (the “Agency”) requires all ILI Associated parties to observe high standards of business and personal ethics in the performance of their duties on the Agency’s behalf. As employees and representatives of the Agency, all ILI Associated parties, are expected to practice honesty and integrity in fulfilling their responsibilities and are required to comply with all applicable laws and regulations. The objectives of this Whistleblower Policy are to encourage and enable Protected Persons, without fear of intimidation and/or retaliation, to raise concerns regarding suspected unethical and/or illegal conduct or practices on a confidential and, if desired, anonymous basis so that the Agency can address and correct inappropriate conduct and actions. This policy is not intended as a method for reporting violations of the Agency’s applicable human resources policies, problems with co-workers or managers, or for reporting issues related to alleged employment discrimination or sexual or any other form of unlawful harassment, all of which should be dealt with in accordance with the Agency’s Personnel Policies and Procedures, as it is those Policies and Procedures that are applicable to such matters.

Reporting Responsibility
It is the responsibility of all Protected Persons to report in good faith any concerns they may have regarding actual or suspected activities which may be illegal or in violation of the Agency policies with respect to, without limitation, fraud, theft, embezzlement, accounting or auditing irregularities, bribery, kickbacks, and misuse of the Agency’s assets, as well as any violations or suspected violations of high business and personal ethical standards, as such standards relate to the Agency (each, a “concern”), in accordance with this Whistleblower Policy and to assist in the investigation and resolution of said reports being made.

No Intimidation and/or Retaliation
No Protected Person who, in good faith, reports a concern shall suffer intimidation, harassment, retaliation, discrimination or adverse employment consequence because of such report. Any ILI Associated parties of the Agency who intimidates and/or retaliates against someone who has reported a concern in good faith is subject to discipline up to and including termination of employment. Notwithstanding anything contained herein to the contrary, this Whistleblower Policy is not an employment contract and does not modify the employment relationship between the Agency and its employees, nor does it change the fact that employees of the Agency are employees at will. Nothing contained herein is intended to provide any Protected Person with any additional rights or causes of action, other than those provided by law.

Reporting Concerns
Any concerns should be reported as soon as practicable to the Agency’s Compliance Officer. Any questions with regard to the scope, interpretation or operation of this Whistleblower Policy should also be directed to the Compliance Officer. If a Protected Person believes the Compliance Officer is somehow involved in the concern, a report should be made to the Executive Director or Board President.

**Compliance Officer**
The Compliance Officer is responsible for investigating and resolving all reported concerns and shall advise the Compliance Committee of all reported concerns. The Compliance Officer shall report to the full Board of Directors at each regularly scheduled board meeting on compliance activity.

**Investigations**
The Compliance Officer is tasked with the responsibility to investigate a reported concern. If necessary and as appropriate, the Compliance Officer may delegate this task to another member of the agency. The Compliance Officer may not delegate such responsibility to an employee or other individual who is the subject of the reported concern or in a manner that would compromise either the identity of an employee who reported the concern anonymously or the confidentiality of the complaint or resulting investigation. For concerns involving the Compliance Officer, the Executive Director or Board President are responsible for investigating or assigning the investigation to another employee. Investigations may include interviews, documentation reviews, and root cause analyses as appropriate. Analyses will also be conducted to determine who, if anyone, may be encouraging, directing, facilitating, or permitting non-compliant behavior. This includes but is not limited to other individuals within the organization who were aware of activities which may be illegal or in violation of the Agency policies but failed to report them. Notwithstanding anything herein to the contrary, the scope, manner and parameters of any investigation of a reported concern shall be determined by the Compliance Committee in its sole discretion and the Agency and all ILI Associated parties shall assist in the investigation and resolution as necessary in connection with any such investigation.

**Acting in Good Faith**
Anyone reporting a Concern must act in good faith and have reasonable grounds for believing that the information disclosed may indicate a violation of law and/or ethical standards. Any allegations that prove to have been made maliciously or knowingly to be false will be viewed as a disciplinary offense.

**Failure to Report**
Failure to report a compliance concern and/or failure to follow ILI Policy and Procedure regarding reporting can lead to disciplinary actions up to and including dismissal. This includes being a participant of non-compliant behavior, and/or encouraging, directing, facilitating or permitting non-compliant behavior to take place.

**Confidentiality**
The Agency takes seriously its responsibility to enforce this Whistleblower Policy and therefore encourages any person reporting a concern to identify him or herself so as to facilitate any
resulting investigation. Notwithstanding the foregoing, in reporting a concern, a Protected Person may request that such report be treated in a confidential manner. Concerns may also be reported on an anonymous basis. Reports of Concerns will be kept confidential unless ordered by a Judge to release.

**Handling of Reported Concerns**
The Compliance Officer will acknowledge receipt of each reported concern within five business days, but only to the extent the reporting person’s identity is disclosed or a return address is provided. All reports will be promptly and thoroughly investigated; the scope of any such investigation being within the sole discretion of the Compliance Committee, and appropriate corrective action will be taken if warranted by the investigation.

At the conclusion of an investigation, a written report will be created and presented to the Compliance Committee. If it is determined that any illegal or unethical practices occurred, referrals will be made to the appropriate external regulatory agencies including but not limited to the Office of the Medicaid Inspector General, Office of the Inspector General, NYS Attorney General, Internal Revenue Service, NYS Department of Health, etc.

As a result of an investigation a plan of correction may be developed by the Compliance Officer as appropriate. Applicable policies, procedures and/or practices may be updated, corrected, or modified as needed.

**Records**
The Compliance Committee will retain, on a strictly confidential basis for a period of seven years, all such records related to reported concerns. Such records will be considered privileged and confidential. In the event of ongoing litigation, records may be retained longer.

**Distribution**
The Agency shall distribute a copy of this Whistleblower Policy to all ILI Associated parties. This policy is contained within the Agency’s compliance plan which is distributed and reviewed with all ILI Associated parties during new hire orientation and annually thereafter.

**Contact the Compliance Specialist or the Chair of the Board of Directors via:**
- [ilccorpcompliance@gmail.com](mailto:ilccorpcompliance@gmail.com)
- Telephone: (845) 565-1162, extension 222
- Mail to: Independent Living, Inc., 5 Washington Terrace, Newburgh, NY 12550
  Attention: Compliance Officer

**Joseph Ranni**, Chair of the Board
- E-mail: [joeranni@rannilaw.com](mailto:joeranni@rannilaw.com)
- Telephone: (845) 651-0999
- Mail to: Independent Living, Inc., 5 Washington Terrace, Newburgh, NY 12550
  Attention: ILI Chair of the Board

Approved by the Agency’s Board of Directors: 3/2020
STATEMENT OF UNDERSTANDING OF
ILI’S CORPORATE COMPLIANCE PLAN

INITIAL REVIEW UPON HIRE

This will certify that I have read and understand ILI’s Corporate Compliance Plan, Conflict of Interest, HIPAA Policies, Personnel Policies and the policies and procedures of the ILI Program in which I am employed. I agree to abide by these codes and policies and procedures during the entire term of my employment, or service as a member of the Board of Directors.

I acknowledge that I have a duty to report any alleged or suspected violation of the Corporate Compliance Plan, Conflict of Interest, False Claims Act and Whistleblower Policy, Medicaid Fraud Prevention Policy, HIPAA Policies, Personnel Guidelines or other ILI policies and procedures. If I have any doubt whatsoever as to the propriety of the particular situation or action, whether or not the situation or action is described within this Corporate Compliance Plan, or in other ILI policies, I understand that it should be submitted either to my immediate supervisor, to the Compliance Officer, a member of the Compliance Committee, or to the President of the Board of Directors. As of this signing, I am not aware of any possible violation of the Corporate Compliance Plan or other ILI policies and procedures.

Signature________________________________________ Date _________________

Print/Type Name _____________________________________________________________

Position ____________________________________________________________________

Please return this form to the Corporate Compliance Officer
STATEMENT OF UNDERSTANDING
OF
ILI’S CORPORATE COMPLIANCE PLAN

ANNUAL REVIEW

This will certify that I have read and understand ILI’s Corporate Compliance Plan, Conflict of Interest, HIPAA Policies, Personnel Policies and the Policies and Procedures of the ILI Program in which I am employed if applicable. I agree to abide by these codes and policies and procedures during the entire term of my employment, or service as a member of the Board of Directors.

I certify that I am not aware of any PAST OR PRESENT circumstances that could represent a potential violation of the Corporate Compliance Plan, Conflict of Interest Statement, False Claims Act and Whistleblower Policy, Medicaid Fraud Prevention Policy, HIPAA Policies, Personnel Guidelines or any other ILI policies and procedures. I will report any potential violation of which I become aware promptly. If I have any doubt whatsoever as to the propriety of the particular situation or action, whether or not the situation or action is described within this Corporate Compliance Plan, or in other ILI policies, I understand that it should be submitted either to my immediate supervisor, to the Compliance Officer, a member of the Compliance Committee, or to the President of the Board of Directors. I understand that any violation of the Corporate Compliance Plan or any other ILI policies and procedures is grounds for disciplinary action, up to and including discharge from employment if applicable.

Signature ______________________________________ Date ______________
Print/Type Name ________________________________________________________
Position __________________________________________________________________

Please return this form to the Corporate Compliance Officer