



Corporate Compliance Program

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Corporate Compliance Program

INTRODUCTION

Mission:

We provide high-quality individualized, comprehensive, and innovative services, which support, educate and provide opportunities for people.

Core Values:

1. Be Exceptional
2. Be Flexible
3. Be Respectful
4. Share Responsibility
5. Be Compassionate
6. Have Integrity
7. Have Fun!!

Purpose of the Compliance Program:

Our Corporate Compliance program helps ensure that Beyond Support Network is in compliance with all applicable laws and regulations, and that the agency operates in a transparent and ethical manner. It aims to prevent and detect legal and ethical violations, minimize risk, and promote a culture of integrity and compliance within the organization. The program is also designed to mitigate the risk of fines, legal action, reputational damage, and other consequences that may arise from non-compliance. Additionally, the corporate compliance program helps the agency achieve its mission and goals in a responsible and sustainable manner.

Beyond Support Network ascribes to a tradition of excellence in the delivery of instruction and services to the people we serve. We are committed to excellence in providing quality, meaningful, and individualized services and have established a Corporate Compliance Program consistent with the agency's principal lines of business. Beyond Support Network strives to develop and maintain best practices in all areas of service. Consistent with this commitment to quality, we implement a compliance program to demonstrate to its stakeholders a commitment to the highest level of professional integrity and ethical standards.

Scope of the Compliance Program:

The Corporate Compliance Program is established for the entire Beyond Support Network community, including Board of Directors, employees, volunteers, contractors, vendors, and others working on behalf of other agencies and businesses doing business with the agency and its related corporations. It is expected that all personnel will be familiar with and carry out responsibilities as set forth in this program. Agency leadership is responsible with ensuring that employees understand and follow the compliance program. Employees that fail to follow this compliance program may be subject to disciplinary action up to and including termination. The Board of Directors, volunteers, interns, vendors, and contractors may also face sanctions for violations and improper conduct. This compliance program was developed in accordance with Social Services Law Section 363-d and title 18 New York Codes of Rules and Regulations Part 521.

Compliance Program Elements:

1. Written Policies, Procedures, and Standards of Conduct
2. Compliance Officer and Compliance Committee
3. Compliance Program Training and Education
4. Lines of Communication

5. Disciplinary Standards
6. Auditing and Monitoring
7. Responding to Compliance Issues

The Compliance Program applies to the following areas:

- Billings
- Payments
- Medical Necessity and Quality of Care
- Governance
- Mandatory Reporting
- Credentialing

ELEMENT 1: WRITTEN POLICIES, PROCEDURES, and STANDARDS OF CONDUCT

Beyond Support Network complies with regulations that require providers to have written policies, procedures, and standards of conduct that govern their compliance program. These written policies and procedures cover several topics including dealing with compliance issues, a description of how compliance issues are investigated and resolved, disciplinary action for failure to comply with the policies, procedures, and applicable law, and a non-intimidation and non-retaliation policy for good-faith program participation.

Beyond Support Network has established procedures for reviewing, revising, and approving these documents, and they are reviewed annually to ensure that they are effective and updated as needed.

Standards of Conduct

Employees and representatives of Beyond Support network are expected to uphold high standards of business and personal ethics in the performance of their duties and responsibilities. This includes practicing honesty and integrity, complying with applicable laws and regulations, and adhering to the following principles of ethics and conduct:

- Display ethical personal conduct
- Perform duties in good faith and to the best of their ability
- Embrace diversity
- Respect truth in all communications with stakeholders
- Participate in scheduled training
- Avoid involvement in any payment or acceptance of payment to secure any concession or contract
- Ensure agency activities are conducted objectively and without personal or financial gain
- Disclose any potential conflicts of interest and refrain from receiving or soliciting remuneration of any kind
- Comply with the agency's gift policy
- Use agency resources only for job-related purposes
- Complete all required documentation accurately and truthfully
- Ensure claims for payment or reimbursement are truthful and supported by relevant documentation
- Comply with regulators and funding sources and refrain from knowingly submitting false claims
- Report any suspected abuse, neglect, or mistreatment involving individuals served
- Follow individual service plans and maintain appropriate interactions with individuals
- Safeguard individual privacy
- Maintain the confidentiality of agency records and avoid unauthorized use of agency assets
- Promptly report any violations or suspected violations of ethical behavior and compliance issues
- Maintain the positive public image of Beyond Support Network
- Refrain from unsafe workplace behavior.

All Board Members, employees, consultants, and volunteers review and attest to these standards of conduct upon hire or appointment and annually thereafter.

Standards of Conduct for the Board of Directors

As the Governing Body of Beyond Support Network, the Board of Directors is responsible for the care, management, and control of the organization and must maintain the highest ethical and moral standards. The Board recognizes that adherence to established ethical standards of fairness, honesty, and integrity is crucial to proper governance and fulfilling its responsibilities. Board members hold an additional level of responsibility and accountability and are therefore expected to adhere to the following:

- **Fiduciary responsibility:** Board members have a fiduciary responsibility to act in the best interest of the organization and its mission. They must exercise due diligence in their decision-making and avoid any conflicts of interest.
- **Confidentiality:** Board members must maintain confidentiality with respect to all non-public information about the organization and its activities, and avoid disclosing such information to anyone without appropriate authority.
- **Legal compliance:** Board members must comply with all applicable laws and regulations, as well as the organization's policies and bylaws.
- **Ethical behavior:** Board members must act with integrity and honesty, avoiding any behavior that would be detrimental to the organization's reputation or mission.
- **Transparency:** Board members must ensure that the organization is transparent in its operations and decision-making processes, communicating with stakeholders and the public in a timely and accurate manner.
- **Conflict of interest:** Board members must disclose any conflicts of interest and refrain from any decision-making that could be influenced by personal gain or bias.
- **Diversity, equity, and inclusion:** Board members should support and promote diversity, equity, and inclusion in all aspects of the organization's operations.
- **Orientation and training:** Board members should receive appropriate orientation and ongoing training to ensure that they are equipped to fulfill their roles and responsibilities effectively.
- **Participation and engagement:** Board members should actively participate in board meetings, committees, and other activities, and be engaged in the organization's mission and strategic direction.
- **Effective governance:** Board members should ensure that the organization has effective governance structures and processes in place, including oversight of the organization's financial management and risk management.

All Board Members review and attest to these standards of conduct appointment and annually thereafter.

Corporate Compliance Investigations

Beyond Support Network has a Corporate Compliance Investigation policy that sets forth guidelines on dealing with compliance issues, a description of how compliance issues are investigated and resolved, and disciplinary action for failure to comply with policies, procedures, and applicable law. This policy establishes procedures for the receipt, documentation, and processing of compliance concerns received by the Compliance Officer. All reports are promptly and thoroughly investigated, and corrective actions are taken if warranted by the investigation. Beyond Support Network keeps complaints confidential to the degree possible as is consistent with a thorough investigation and applicable laws. If employee misconduct is determined, corrective action is taken in accordance with Beyond Support Network's Standards of Conduct and disciplinary policies. Corrective action may include internal remediation or referring the matter to appropriate civil or criminal authorities. No harassment or retribution is tolerated or made against any employee who, under good faith, makes a report of concern.

Conflict of Interest

Beyond Support Network has a Conflict of Interest policy that is required for all Board Members, employees, consultants, and volunteers to abide by the Conflict of Interest policy. A Conflict of Interest is defined as any situation in which financial or other personal considerations may compromise or appear to compromise business judgment, delivery of services, or ability to perform essential job functions. Actual or potential conflict of interest occurs when a person is in a position to influence a decision that may result in a personal gain for them or for a relative as a result of business dealings. This policy mandates that they conduct their duties within established guidelines that prohibit any actual, potential, or perceived conflict of interest. They must disclose any personal or professional relationships that may result in a conflict of interest or the appearance of one. They must also report any such conflicts at the time of appointment, hire or assignment, and must not participate in any decision-making activities where a conflict exists.

A Conflict of Interest Disclosure and Confidentiality Statement is completed at the time of hire/appointment, promotion, or when circumstances change warranting an update. Board members, senior leadership, general leadership, finance employees, and human resources employees complete this statement annually.

Gift Giving / Gifts from External Business Parties to Employees or Representatives

Beyond Support Network's policy on Gift Giving / Gifts from External Business Parties to Employees or Representatives prohibits employees from accepting gifts or entertainment from vendors, directly or indirectly, that exceed \$25.00 in value at any time of the year. This includes items of value, quasi-social invitations, vendor promotion credits, money, services, loans, travel, entertainment, hospitality, promises, or any other form of gift that could be inferred to influence the recipient into giving special consideration in the performance of their official duties. Gifts are defined as a tangible or intangible item of any value received from external resources/vendors, directly or indirectly by the employee as a means of obtaining preferential treatment.

Deficit Reduction Act Notification

Beyond Support Network has a policy to assist in ensuring the integrity of the compliance program by safeguarding against Medicaid abuse and the submission of false or fraudulent Medicaid claims in accordance with New York Social Services Law § 363-d, NYCRR Title 18 Part 521, and the Deficit Reduction Act (DRA) obligations in 42 USC § 1396a(a)(68).

Beyond Support Network provides all employees, contractors and agents with detailed information about:

- the federal False Claims Act;
- the federal administrative remedies associated with the False Claims Act;
- state laws pertaining to civil or criminal penalties for false claims and statements;
- whistleblower protections provided under federal and state laws; and
- the role of federal and state laws in preventing and detecting fraud, waste and abuse.

Whistleblower Protection - Non-Intimidation and Non-Retaliation

Beyond Support Network has a policy of non-intimidation and non-retaliation for good faith participation in the compliance program, which includes reporting potential issues such as fraud and abuse, investigating issues, self-evaluations, audits, remedial actions, and reporting to appropriate officials. This policy was developed in accordance with section 740 and 741 of the NYS Labor Law and New York State's Nonprofit Revitalization Act (NPRA). Employees may report any violations or suspected violations through various means and to specific individuals, including their immediate supervisor, program director, Director of Human Resources, or the Compliance Officer. Retaliation against anyone who participates in good faith is

strictly prohibited, and any retaliation claims will be thoroughly investigated. False allegations are considered a serious offense and may result in severe disciplinary action.

ELEMENT 2: COMPLIANCE OFFICER and COMPLIANCE COMMITTEE

Compliance Officer

Beyond Support Network has designated a compliance officer to comply with 18 NYCRR § 521-1.4(b). The Compliance Officer is responsible for overseeing and monitoring the adoption, implementation, and maintenance of the compliance program and evaluating its effectiveness. They are also responsible for drafting, implementing, and updating a compliance work plan annually and reviewing and revising the compliance program, policies, procedures, and standards of conduct to incorporate changes based on organizational experience and changes to Federal and State laws, rules, regulations, policies, and standards.

The Compliance Officer provides regular reporting to the Boards of Directors, Executive Director, the agency's compliance committee comprised of senior leadership, and to Board of Directors Audit and Risk Committee on the progress of the compliance program and assists with establishing methods to improve efficiency, quality of services, and reduce vulnerability to fraud, waste, and abuse. Additionally, the Compliance Officer investigates and independently acts on matters related to the compliance program, including the coordination of any internal investigations and external special investigation as applicable.

To ensure the Compliance Officer has the ability to carry out their primary responsibilities of the compliance program, Beyond Support Network also employs a Compliance Specialist. The Compliance Officer and Compliance Specialist have access to all relevant records, documents, information, facilities, and affected individuals necessary to carry out their compliance program responsibilities.

Compliance Committee

In accordance with 18 NYCRR § 521-1.4(c), Beyond Support Network has a compliance committee comprised of senior leadership that meets at least quarterly, to review compliance program activities. The Compliance Officer serves as the chairperson and the Executive Director attends these meetings. Additionally, through governing by-laws, Beyond Support Network has a Board of Directors Audit and Risk Committee that are responsible with ensuring that an effective compliance program is in place and that there are systems and processes to identify compliance risks and other issues. The Compliance Officer, Executive Director, and Chief Financial Officer serve as advisory participants on this committee. The Board of Directors Audit and Risk committee meets quarterly to review compliance work plan items, including reviewing and approving annually the Corporate Compliance Program, related policies, and the committee charter. In conjunction with the Senior Leadership Compliance Committee and chairperson of the Board of Directors Audit and Risk Committee, compliance program reports are provided to the entire Board of Directors on a quarterly basis.

ELEMENT 3: COMPLIANCE PROGRAM TRAINING AND EDUCATION

Beyond Support Network has established and implemented an effective compliance training and education program for senior leadership, the compliance officer, the governing body, and all affected employees and individuals, in compliance with 18 NYCRR § 521-1.4(d). The program includes training on the required provider's risk areas and organizational experience, written policies and procedures, role of the compliance officer and committee, reporting procedures for potential compliance-related issues,

disciplinary standards, compliance issue response, and coding and billing requirements. Training is done annually and upon hiring, in a method that is accessible and understandable to all.

Compliance Training Plan

Beyond Support Network's has a training plan that outlines the subjects or topics for training and education, timing and frequency, attendance tracking, and periodic evaluation of effectiveness. The Compliance Officer ensures participation in all required training. All new employees participate in an orientation program designed to familiarize new employees with Beyond Support Network, its policies and procedures, programs, the corporate compliance program, and expectations. Attendance is mandatory and successful completion of the orientation program and ongoing training throughout employment is a condition of employment. Annual compliance training to affected employees and individuals is mandatory. Additional ongoing training is provided as necessary when there are regulations or policy changes, or when there is identification of trends via internal and/or external audits.

Compliance training has been customized to meet the educational needs required for that position. The Compliance Officer also regularly participates in required corporate compliance training. This includes compliance training via conferences and seminars, learning management systems, and through DDAWNY Compliance Committee meetings, which meet on a quarterly basis.

ELEMENT 4: LINES OF COMMUNICATION

Beyond Support Network has established and implemented effective lines of communication in accordance with 18 NYCRR § 521-1.4(e). The lines of communication are accessible to all affected individuals, allowing for questions regarding compliance issues to be asked and compliance issues to be reported. Beyond Support Network has publicized the lines of communication to the compliance officer and made them available to all affected individuals and recipients of service. There is also a method for anonymous reporting of potential fraud, waste, and abuse, and compliance issues directly to the compliance officer, ensuring the confidentiality of persons reporting compliance issues. Additionally, information is available on the agency's website regarding Beyond Support Network's compliance program, including its standards of conduct.

Beyond Support Network emphasizes the importance of reporting any violations or suspected violations in a timely and accurate manner. As part of its commitment to confidentiality, the agency ensures that the identity of anyone reporting a compliance issue in good faith is protected. It is crucial to note that confidentiality is maintained unless the matter is under investigation by regulatory agencies or required by law to be disclosed. The agency has implemented policies that protect individuals reporting compliance issues from retaliation or intimidation. All members of the organization, including Board members, employees, consultants, volunteers, and contractors, have a responsibility to report any violations or suspected violations.

Reports and concerns can be made through various means, including telephone, email, in person, or via the Confidential Compliance Hotline. Callers who use the Confidential Compliance Hotline may remain anonymous. Notices with the hotline's phone numbers are posted on the agency's website and throughout Beyond Support Network buildings and work locations. The Compliance Officer is responsible for primary oversight of the hotline. The Director of Quality Assurance serves as a backup only when the Compliance Officer is not available.

ELEMENT 5: DISCIPLINARY STANDARDS

Beyond Support Network has established and implemented disciplinary standards and procedures for potential violations and encouraging good faith participation in the compliance program by all affected individuals, in accordance with 18 NYCRR § 521-1.4(f). These policies articulate expectations for reporting compliance issues, assist in their resolution, and outline sanctions for failing to report suspected problems, participating in non-compliant behavior, and/or encouraging, directing, facilitating or permitting either actively or passively noncompliant behavior. These policies are provided in employee handbooks and via electronic access to policies on the agency's network and are fairly and firmly enforced.

These standards have been published and disseminated to all affected individuals and incorporated into the agency's training plan. Beyond Support Network enforces its disciplinary standards fairly and consistently, applying the same disciplinary actions to all levels of personnel. They are applied uniformly on a non-discriminatory basis and are not intended to be all-inclusive. An employee who fails to abide by the established rules of conduct set forth in administrative notices or policy, the employee handbook or verbally by a supervisor will be subject to disciplinary action, up to and including dismissal. Beyond Support Network may begin discipline at any level of the progressive disciplinary system, depending on the circumstances involving the misconduct.

ELEMENT 6: AUDITING and MONITORING

Beyond Support Network has implemented an effective auditing and monitoring system, as required by 18 NYCRR § 521-1.4(g), which includes routine internal and external audits and monitoring to evaluate compliance with program requirements and the effectiveness of the compliance program. The auditing program identifies risk areas, documents audit results, and reports any program overpayments. Additionally, Beyond Support Network conducts annual compliance program reviews, documents the results and corrective action taken, and confirms the exclusion status of affected individuals and contractors by reviewing State and Federal databases at least every 30 days. These activities are promptly shared with the compliance officer and appropriate compliance personnel. Furthermore, the organization has established policies and procedures for self-assessments, credentialing, mandatory reporting, governance, and quality of care for medical assistance program beneficiaries.

Record Reviews / Auditing

Routine internal record reviews are conducted to ensure compliance and to identify and share best practices. These reviews are intended to identify possible instances of error, fraud, abuse, waste, and to implement necessary corrective action. The size and frequency of the review sample will be based on program enrollment and scope, but typically include at least 10% of the files and 25% when there are reported issues. The audit schedule is reviewed and approved on an annual basis by the Compliance Committee and the Board of Directors Audit and Risk Committee.

The Compliance Officer ensures that audit tools address the current regulatory requirements and program standards, with audits completed more frequently if there are significant concerns with the documentation, changes in regulations, or changes in program management staff. In cases where potential documentation or billing errors are discovered during routine employee/supervisor review of documentation, staff must immediately notify the Compliance Officer upon discovery, with failure to do so potentially resulting in disciplinary action.

The Compliance Officer tracks all internal audits and reports findings to the Compliance Committee and Board of Directors, and program directors are responsible for reviewing and tracking internal and external audits and developing corrective plans. Correction actions plans address various areas such as corrective

billing actions, possible disciplinary action, additional staff training, development/revision of policies and procedures, and/or reporting to governmental agencies.

The Compliance Officer and Compliance Committee determine if audit findings need to be self-reported to the Department of Health (DOH) or NY State Office of the Medicaid Inspector General (OMIG), following the OMIG statutory and regulatory requirements.

Penalties for failing to meet compliance program requirements:

- \$5,000 per month up to 12 months for failure to meet Compliance Program requirements;
- Can increase to \$10,000 per month up to 12 months if penalty was imposed in past 5 years.

Credentialing and Screening

Beyond Support Network ensures that all employees, providers, and vendors involved in delivering our services are appropriately qualified and eligible. Background checks and screening of employees, volunteers, interns, providers, independent contractors, and vendors, are conducted as required by law. Exclusion screening is conducted prior to hiring and regularly thereafter, with audits conducted by the Compliance Officer or designee. The Human Resources Department is responsible for completing and maintaining background screenings and required pre-employment documents for each new hire, as required by applicable oversight agencies. The Finance Department is responsible for completing and maintaining appropriate background checks of all vendors and contractors. Beyond Support Network strictly prohibits employing or contracting with excluded individuals or entities.

Penalties for employing or contracting with an excluded person or entity is

- Up to \$10,000 per violation
- Up to \$30,000 per violation if previous violation has occurred in past 5 years

Annual Compliance Program Review

In accordance with 18 NYCRR § 521-1.4(g) and corresponding Corporate Compliance Program policy, Beyond Support Network conducts an annual review of its compliance program to determine its effectiveness and whether any corrective action is needed. The review is conducted by the Compliance Officer, Compliance Committee, and Board of Directors Audit and Risk Committee. Other designated staff may also conduct a review, provided they have the necessary knowledge and expertise and are independent from the functions being reviewed. The review may include on-site visits, interviews, record reviews, external audit reviews, surveys, or any other appropriate method that does not compromise the review's independence or integrity. Metrics that may help measure effectiveness include, but are not limited to:

- Number of compliance violations reported and resolved
- Percentage of employees who have completed compliance training
- Percentage of compliance audits completed on time
- Percentage of corrective actions implemented within the required timeframe
- Number of complaints received and investigated
- Percentage of confidential hotline calls or reports followed up on
- Number and types of compliance-related incidents or breaches
- Number of compliance violations
- Amount of fines or penalties imposed by regulatory agencies for non-compliance
- Number of compliance-related lawsuits filed against the organization
- Overall level of compliance risk and exposure to regulatory penalties.
- Percentage of audits with no findings

Records Retention

As effective records retention is essential for maintaining compliance with legal and regulatory requirements, Beyond Support Network has an established Records Retention and Disposition policy on the management of agency records and other documents. This policy includes processes on the identification and management of records and information of value, the use of computer or other technology to efficiently create, manipulate and store the information, the disposition of obsolete records, and the storage and management of archived records no longer needed for day-to-day operations.

Records are maintained in accordance with a referenced schedule adopted by Beyond Support Network. All provisions of an approved schedule remain in effect until the schedule is officially amended or updated. The Compliance Officer, in conjunction with agency leadership and the Board of Directors Governance Committee are responsible with reviewing the schedule and determining if there any changes warranted based on state and federal regulations.

ELEMENT 7: RESPONDING TO COMPLIANCE ISSUES

Beyond Support Network has established and implemented procedures and systems as required by the regulation 18 NYCRR § 521-1.4(h) for promptly responding to compliance issues, investigating potential compliance problems, correcting such problems promptly and thoroughly, and ensuring ongoing compliance with state and federal laws, rules, regulations, and requirements. This includes promptly investigating and taking corrective action upon the detection of potential compliance risks and issues through reports or monitoring, and thoroughly documenting the investigation process, including alleged violations and interview notes. This also includes documenting any disciplinary and corrective actions taken and promptly reporting any credible evidence or belief of violation to the appropriate governmental entity.

Compliance Investigations

In accordance with 18 NYCRR § 521-1.4(h) and corresponding Corporate Compliance Investigation policy, Beyond Support Network has established procedures on dealing with compliance issues, a description of how compliance issues are investigated and resolved, and disciplinary action for failure to comply with policies, procedures, and applicable law. This policy establishes procedures for the receipt, documentation, and processing of compliance concerns received by the Compliance Officer. All reports are promptly and thoroughly investigated, and corrective actions are taken if warranted by the investigation. Beyond Support Network keeps complaints confidential to the degree possible as is consistent with a thorough investigation and applicable laws. If employee misconduct is determined, corrective action is taken in accordance with Beyond Support Network's Standards of Conduct and disciplinary policies. Corrective action may include internal remediation or referring the matter to appropriate civil or criminal authorities.

Office of the Medicaid Inspector General (OMIG) Investigations

In accordance with 18 NYCRR § 521-1.4(h) and corresponding Corporate Compliance Investigation policy, Beyond Support Network cooperates fully with any OMIG investigation that may be initiated. A designated point person is responsible for managing the investigation and serving as the primary point of contact for the OMIG investigator. The designated point person promptly notifies the Compliance Officer of the investigation and provides any information that may be relevant to the investigation. Beyond Support Network provides access to all records and documentation requested by the OMIG investigator in a timely and efficient manner. All employees of Beyond Support Network are instructed not to interfere with the investigation in any way and to cooperate fully with the OMIG investigator. Beyond Support Network's compliance procedures and systems are followed to ensure that any compliance issues or potential compliance problems related to the investigation are addressed promptly and thoroughly. The Compliance

Officer oversees the investigation and ensures that all actions taken are consistent with the provider's policies and procedures and applicable laws, rules, and regulations. If necessary, Beyond Support Network retains outside experts, auditors, or counsel to assist with the investigation where appropriate. Any disciplinary and corrective actions taken in response to the investigation are thoroughly documented. Beyond Support Network remains in compliance with all applicable laws, rules, and regulations related to the OMIG investigation.

Self-Disclosures

In accordance with 18 NYCRR § 521-1.4(h) and corresponding Corporate Compliance Investigation policy, Beyond Support Network has processes for self-disclosure and corrective action in cases where a compliance issue or overpayment is identified. The responsible individual is required to report the issue to the Compliance Officer immediately, who determines if a self-disclosure is necessary. If a self-disclosure is required or if there is potential legal or financial risk, legal counsel is obtained to assist with the self-disclosure process. The self-disclosure is submitted to the appropriate regulatory agency in a timely manner, in accordance with applicable regulations. The Compliance Officer then develops and implements a corrective action plan to address the issue and prevent its recurrence. The corrective action plan is monitored for effectiveness and any necessary adjustments are made. Documentation of the self-disclosure and corrective action plan is maintained in accordance with record retention policies.