



**RIVERSPRING LIVING HOLDING CORP.
AND AFFILIATES¹**

**SUMMARY OF STANDARDS OF CONDUCT AND COMPLIANCE AND ETHICS
PROGRAM OPERATIONS FOR CONTRACTORS OF:**

- The Hebrew Home at Riverdale
- The RiverSpring Certified Home Health Care Agency
- The RiverSpring Assisted Living Program

SUMMARY OF THE ORGANIZATIONS' COMMITMENT TO COMPLIANCE

The Hebrew Home at Riverdale ("HHAR") and the health care provider entities and programs associated with HHAR (RiverSpring Certified Home Health Care Agency and RiverSpring Assisted Living Program) (collectively referred to hereafter as the "Organizations") are committed to providing high quality and caring services pursuant to the highest ethical, business, and legal standards, including Federal health care program requirements (e.g., Medicare and Medicaid).

Our Compliance and Ethics Program (the "Program") is designed to help us prevent fraud and abuse in Federal health care programs. To the extent that Contractors meet the definition of an "***affected individual***," they are subject to the Program.² Contractors are only subject to the Compliance and Ethics Program to the extent it is related to their contracted role and responsibilities within the Organizations' identified compliance risk areas. ***Failure of an affected***

¹ Affiliates include: RiverSpring Living Holding Corp., The Hebrew Home at Riverdale, RiverSpring Health Plans, RiverSpring Licensed Home Care Services Agency, Inc., Hebrew Home Housing Development Fund Co. Inc., Hudson House Housing Development Fund Company, Inc., The Hebrew Home for the Aged at Riverdale Foundation, Inc., RiverSpring Services Corp., RiverSpring Health Senior Living, Inc., The National Alzheimer Center, Riverdale Terrace Housing Development Fund Company, Inc.

² "***Affected individuals***" means all persons who are affected by the Organization's compliance risk areas (which are discussed below in Element 6). This includes employees; the chief executive, other senior administrators and managers; Contractors; the governing body and corporate officers.

individual to meet the Program's requirements may result in termination of contract or affiliation with the Organizations.

SUMMARY OF STANDARDS OF CONDUCT FOR CONTRACTORS

- **Responsibility of Our Contractors.** Contractors are expected to comply and be familiar with all federal and state laws, rules, and regulations that govern their work for the Organizations. *All Contractors are also expected to comply with the Program, these standards of conduct, and any applicable Organization compliance standards and policies.* Compliance with the Program, standards of conduct and compliance policies and procedures is a condition of association with the Organizations. Violations will result in discipline, including, termination of contract or affiliation.

- **Honesty and Lawful Conduct.** We expect and require all Contractors to be law-abiding, honest, trustworthy, and fair in all business dealings. Contractors should avoid all illegal conduct and not take any action that they believe violates any statute, rule, or regulation, strive to avoid the appearance of impropriety, and never act in a dishonest or misleading manner.

- **Reporting Requirements.** Suspected misconduct or possible violations of the Organizations' Program must be reported to a manager or supervisor, a member of senior management or the Compliance Officer. Contractors may also report their concern through the Compliance "Helpline." Questions or concerns may be raised anonymously, if you wish, via the Compliance Helpline. Reports will be treated confidentially, whether requested or not, unless the matter is subject to a disciplinary proceeding, referred to or under investigation by the NY State Medicaid Fraud Control Unit (MFCU), the Office of Medicaid Inspector General (OMIG) or law enforcement or if disclosure is a requirement in connection with a legal proceeding.

Organization	Compliance Officer	Contact Information
The Hebrew Home at Riverdale The RiverSpring Certified Home Health Care Agency The RiverSpring Assisted Living Program d/b/a The Terrace Assisted Living	David Siegelman	(718) 581-1731 david.siegelman@riverspring.org
RiverSpring Living's Compliance Helpline for the Organizations (can be used for anonymous reporting)		Ph: (718) 581-1025

- **No Retaliation or Intimidation.** The Organizations maintain a policy of non-retaliation and non-intimidation for good faith participation in the Program. Good faith participation includes, but is not limited to reporting actual or potential compliance issues to appropriate Program personnel (e.g., the Compliance Officer); cooperating or participating in the investigation of compliance issues; assisting with or participation in self-evaluations and audits; assisting with or participation in remedial actions / resolution of compliance issues; reporting acts of retaliation or intimidation and reporting potential fraud, waste or abuse to appropriate State or Federal entities.

Acts of retaliation or intimidation should be immediately reported to the Compliance Officer or to the Helpline and, if substantiated, the individuals responsible will be disciplined appropriately.

- **Non-Discrimination.** All residents and clients will have access to admission and care without regard to race, creed, color, national origin, gender, age, citizenship or immigration status, actual or perceived sexual orientation, gender identity, gender expression, marital status, disability, human immunodeficiency virus (HIV) status or other characteristic specified by law, source of payment or sponsorship. Admission decisions are solely based on the ability of the Organizations to adequately care for and provide services to the resident or client.

- **Exclusion Checks.** The Organizations conduct appropriate background checks on certain Contractors and requires those Contractors who assign staff that may be providing services to residents and clients on behalf of the Organizations to check applicable federal and state databases prior to assignment and on a monthly basis thereafter to ensure Contractor employees are not excluded from participating in federal health care programs (*e.g.*, Medicare and Medicaid). Contractors are required to maintain documentation demonstrating compliance with this condition and immediately disclose to the Compliance Officer if the Contractor or any of its staff becomes excluded or otherwise ineligible.³

- **Compliance with the Federal Deficit Reduction Act of 2005 (“DRA”).** In accordance with the DRA, the Organizations have established written policies for all employees and Contractors that provide detailed information about the federal False Claims Act, federal administrative remedies for false claims and statements, the New York State false claims provisions, state penalties (both civil and criminal) for false claims and statements, whistleblower protections under such laws, and the role of these laws in preventing and detecting fraud, waste and abuse in federal health care programs (*e.g.*, Medicare and Medicaid). A copy of the DRA policy is provided to applicable Contractors and is also available upon request. We request that Contractors review the laws with their employees.

- **Quality of Care/Medical Necessity.** The Organizations are fully committed to providing high quality services in accordance with all applicable laws, rules and regulations, including federal health care program requirements. Care and treatment are provided pursuant to comprehensive care planning and/or physician orders, but only to the extent that these services are reasonable and necessary for the treatment of the resident or client.

- **Abuse Prohibition and Reporting Requirements.** The Organizations will not tolerate any abusive behavior or other inappropriate actions toward our nursing home residents, home health clients or assisted living clients by anyone, including, Contractors and other personnel, other residents, clients, family members or legal guardians, friends or other individuals.

- **HHAR Reporting.** Contractors are required to immediately report abuse, neglect, exploitation, mistreatment and misappropriation of resident property to the HHAR Vice President of Nursing Services or the Administrator. Contractors are also required

³ The applicable databases are: <https://exclusions.oig.hhs.gov/> (the United States Department of Health and Human Services, Office of Inspector General’s List of Excluded Individuals/Entities); and <https://omig.ny.gov/medicaid-fraud/medicaid-exclusions> (the New York State Office of the Medicaid Inspector General’s Medicaid Exclusion List).

to report injuries of unknown source, quality of care issues (*e.g.*, medication errors/diversion, elopement, burns, choking, etc.) and physical environment issues (*e.g.*, malfunction or misuse of equipment, physical plant issues, etc.).

- **RiverSpring Certified Home Health Care Agency Reporting.** Any CHHA Contractor that identifies, notices, or recognizes incidences or circumstances of mistreatment; verbal, mental, sexual, and physical abuse; injuries of unknown source; neglect of misappropriation of property must report these findings immediately to the Director of Patient Services/ Administrator or designee.
- **RiverSpring Assisted Living Program Reporting.** Contractors of the Assisted Living Program must immediately report incidents of physical, mental or emotional abuse, neglect, misappropriation of resident property and other mistreatment to the Administrator.

Contractors who engage in abusive or other prohibited conduct, commit crimes against residents or clients or who fail to report such activity as required, will be subject to disciplinary action up to and including termination of contract or affiliation with the Organizations.

- **Compliance with the Elder Justice Act (the “EJA”).** The EJA requires HHAR Contractors (as well as employees) to report any reasonable suspicion of criminal activity including abuse against a resident of a long term care facility or against any person receiving care from the facility to the state survey agency (the Department of Health or “DOH”) and local law enforcement agency. Contractors may satisfy this obligation by reporting the reasonable suspicion of a crime to the Vice President of Nursing Services, who will coordinate timely reporting to the DOH and to local law enforcement, in accordance with the required timeframes, as set forth in the Organizations’ policy for Compliance with the EJA/Reporting Reasonable Suspicion of a Crime.

- **Gifts and Benefits.** The guiding principle is: Contractors may not be involved with gifts or benefits that are undertaken in return for or to induce referrals or the purchasing, leasing, ordering or arranging (or the recommending of any of the foregoing) of any item or service.

- **Confidentiality.** Contractors who learn confidential information about the Organizations or residents and clients may not share that information with anyone, including family or friends.

- **Covid-19 Requirements.** Contractors are required to comply with Organization policies related to COVID-19 and any applicable federal or state directive, order, statute or regulation governing the Organizations’ response to COVID-19, as applicable.

- **Smoke-Free Environment.** The Organizations maintain a smoke free environment, both indoors and outdoors. In accordance with New York City Law, smoking (including the burning of a lighted cigarette, cigar, pipe or any other matter or substance which contains tobacco, or e-cigarettes or vape mods) is prohibited anywhere on or near (*i.e.*, within 15 feet of) the grounds of our facilities and anywhere within the interior spaces.

- **Substance Abuse Free Environment.** It is the Organizations’ policy to maintain a substance abuse free workplace. We do not tolerate substance abuse in the workplace, nor permit

anyone to work here who is under the influence of drugs or alcohol. The unlawful manufacture, distribution, dispensing, possession or use of a controlled substance or alcohol while on the Organizations' premises or while in a work status is prohibited.

- **Cleanliness.** The Organizations' maintain a clean and litter free environment. Contractors are required to maintain a clean work area while on the Organizations' premises and discard all litter in the appropriate receptacles.

- **Discipline.** Contractors who violate the Program, standards of conduct or commit illegal acts are subject to discipline, including termination of contract or affiliation with the Organizations. Discipline will be enforced for:

- Failure to report suspected problems;
- Participation in non-compliant behavior;
- Encouraging, directing, facilitating or permitting non-compliant behavior;
- Failure by a violator's supervisor(s) to detect and report a compliance violation, if such failure reflects inadequate supervision or lack of oversight;
- Refusal to cooperate in the investigation of a potential violation;
- Refusal to assist in the resolution of compliance issues; and
- Retaliation against, or intimidation of, an individual for their good faith participation in the Compliance Program.

HOW THE COMPLIANCE AND ETHICS PROGRAM OPERATES

The Compliance and Ethics Program includes the following operational elements:

(1) Written Standards and Procedures

The Organizations have developed and distributed written standards of conduct (embodied in a Code of Conduct), as well as written policies and procedures that promote our commitment to compliance, address specific areas of potential fraud and abuse, and give guidance to affected individuals about how the Program operates and how compliance issues are investigated and resolved. The Code of Conduct and written policies and procedures are available to all affected individuals. Policies and procedures include, but are not limited to:

- Compliance with Federal and State False Claims Laws: Overview of the Laws Regarding False Claims and Whistleblower Protections (the DRA Policy);
- Compliance with the EJA/Reporting Reasonable Suspicion of a Crime;
- Gifts, Gratuities, Entertainment and Fundraising;
- Policy Statement on Ethics, Integrity and Conflict Of Interest;
- Protocols for Investigations and Implementing Corrective Action;
- Reporting Compliance Issues: Whistleblowers and Non-Retaliation/Non-Intimidation Policy; and
- Summary of Policies Regarding the Reporting, Investigation and Prohibition /Prevention of Resident Abuse, Neglect, Exploitation, Mistreatment and Misappropriation of Resident Property.

There may be additional compliance policies and procedures that are applicable to the services you render to or on behalf of the Organizations. Copies are available to Contractors upon request. You may also contact the Compliance Officer if you wish to inquire about specific aspects about the Program, specific policies or procedures, or questions you may have.

(2) Oversight

The Organizations have designated a Compliance Officer and a Compliance Committee charged with the responsibility for developing, operating, and monitoring the Program. The Compliance Officer and the Committee are accountable to and report directly to the governing board and Organization leadership.

(3) Mandatory Education and Training

The Organizations have developed and conduct effective education and training programs that cover, among other things, compliance risk areas, expectations, disciplinary standards and the operation of the Program.

(4) Reporting System

The Organizations have established and implemented effective lines of communication, ensuring confidentiality, that are accessible to all affected individuals and all residents/clients receiving services from the Organizations. This includes an anonymous method for reporting (*i.e.*, the Helpline) and allows for questions regarding compliance issues to be asked and for compliance issues to be reported.

(5) Disciplinary Standards

The Organizations have established well-publicized disciplinary standards to encourage good faith participation in the Program by all affected individuals. It is our policy that discipline is enforced fairly and consistently.

(6) Auditing and Monitoring System

The Organizations use audits and/or other risk evaluation techniques to monitor compliance, identify risk areas, such as coding, billing and documentation and payment practices; issues relating to quality of care and medical necessity of services; the credentialing process; compliance with mandatory reporting requirements; governance standards; contractor oversight and other potential compliance risk areas that may arise from complaints, risk assessments, or that are identified by specific compliance protocols or through other means.

(7) Response System

The Organizations have established and implemented procedures and a system for promptly responding to compliance issues as they are raised, investigating potential compliance problems as identified in the course of self-evaluations and audits, correcting such problems promptly and thoroughly, including reporting of any violations of State or Federal law. These

steps reduce the potential for recurrence, and ensure ongoing compliance with Federal health care program requirements (*e.g.*, the Medicare and Medicaid Programs).

ACKNOWLEDGMENT OF RECEIPT

My team and I acknowledge that we have received the Summary of the Standards of Conduct and Compliance and Ethics Program Operations for Contractors of the Organizations.

We agree to read the information provided, to follow all of its requirements and to cooperate with the Organizations in carrying out the Compliance and Ethics Program.

We acknowledge that we may request additional information about the Compliance and Ethics Program, including the Code of Conduct, specific compliance policies and procedures, and clarification about our obligations by contacting the Compliance Officer.

We further certify that we know of no conduct by any Contractor staff that may violate any law, rule, or regulation applicable to the Organizations and their business practices or services.

Acknowledged and agreed:

Signature

Print name

Job Title or Description

Contractor Name

_____, 20____
Today's Date

THIS FORM MUST BE SIGNED, DATED AND RETURNED TO THE COMPLIANCE OFFICER.