



CHESS HEALTH SOLUTIONS

# COMPLIANCE PLAN

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## INTRODUCTION

### OUR COMMITMENT TO COMPLIANCE

Cornerstone Health Enablement Strategic Solutions, LLC (CHESS) is committed to the highest standards of ethics, honesty, and integrity in pursuit of empowering physicians and health systems to make the transition to value-based care. CHESS believes collaboration is essential to the integrity and promotion of ethical practice in business and is committed to maintaining the highest level of professional and business standards. CHESS believes in promoting an environment that encourages a culture of right-doing, personal responsibility, and integrity through implementing this Compliance Plan.

The CHESS Compliance Plan reinforces our commitment to comply with all applicable federal and state laws. As CHESS is the parent company for several subsidiaries, including CHESS Value, LLC, CHESS Innovation, LLC, and CHESS Genesis, LLC which includes the Medicare Shared Savings Program (MSSP) and other federal accountable care models, CHESS adheres to the requirements of both the MSSP regulations and the requirements defined in any other federal value-based care model in which CHESS participates. Each subsidiary has its own Compliance Plan that builds on the foundation established by this CHESS Compliance Plan. Each plan includes, among other matters, a conflict of interest policy, measures related to mandatory compliance training, HIPAA privacy and security training, fraud, waste and abuse detection, prevention, and correction, including a hotline for anonymous reporting, and training for participants and providers whose work is linked to recognized risk areas.

### OUR HISTORY

Founded in 2012 by Cornerstone Health Care, P.A. (High Point, NC), CHESS was and continues to be committed to helping health care organizations deliver higher quality, lower cost health care that is patient focused. Led by a team of medical, technology, and business experts who have a deep understanding of what it takes to transition clients into a value-based healthcare environment, CHESS offers a single solution that incorporates the essential elements required to successfully make the move to “value-based medicine.”



# CHESS COMPLIANCE PLAN

## OUR COMPLIANCE PLAN MISSION

CHESS is dedicated to providing the highest level of service to client's patients while eliminating waste and decreasing expenditures through enhanced coordinated care. Our Compliance Plan is an integral part of the achievement of our goal of being a premier value-centered organization.

Our Compliance Plan aims to:

- Promote continuous improvement by establishing our policies, standards, and dedication of resources.
- Encourage and facilitate ethical behavior and the utmost integrity.
- Prevent, detect, and correct criminal conduct or other violations of our standards of conduct.
- Empower everyone to identify problems and provide a road map to resolve issues and problems.

To accomplish our compliance goals, the CHESS Board of Managers has unanimously consented to enforce all aspects of the Compliance Plan consistently and throughout the entire organization.

## OUR COMPLIANCE PLAN SCOPE

### PLAN AUDIENCE

Our Compliance Plan serves as a compliance resource for all individuals who perform work on behalf of CHESS, CHESS providers/suppliers, CHESS Clients, and other individuals or entities performing functions or services related to CHESS activities. It does this by establishing a framework for conducting our activities with integrity and accountability.

### PLAN FRAMEWORK

CHESS is fully committed to conducting its activities in compliance with all federal, state, and local laws and regulations and in conformance with the highest standards of business integrity. The policies, standards, and procedures outlined herein reflect the dedicated commitment of the CHESS Board of Managers to full compliance with legal, regulatory, and ethical standards.

To facilitate consistent and meaningful implementation and ongoing compliance, our Compliance Plan is based on the following seven elements:

- Development and implementation of written policies, procedures, and standards;



- Designation of a Compliance Official to monitor compliance efforts and enforce standards;
- Conducting appropriate training and education;
- Conducting internal monitoring and auditing;
- Responding appropriately to detected offenses and developing corrective action;
- Developing open lines of communication including an anonymous hotline; and
- Enforcing disciplinary standards through well-publicized guidelines.

The Compliance Plan is designed to provide a solid basis upon which to build a compliant environment by following the seven components of an effective compliance program as outlined by the Office of Inspector General (“OIG”).

## PLAN COMMITMENT

Each individual doing work on behalf of CHESS is required to both acknowledge they have received a copy of The Compliance Plan and commit to abide by all aspects of the content as outlined in The Compliance Plan. Each individual performing functions or services related to CHESS activities is responsible for understanding the rules and regulations associated with their essential functions, acting in a legal and ethical manner, and reporting all suspected noncompliant policies, operations, or practices.

The CHESS Board of Managers has empowered the Compliance Officer and Compliance Department to review, investigate, and offer solutions to compliance issues.

## PLAN REVIEW

The Compliance Officer, and delegates as appropriate, will review this Plan with the Compliance and Enterprise Risk Committee as necessary and at least annually. Through the above-described governance mechanisms, they will update the Plan and any related policies to reflect changes in applicable laws or regulations, CHESS Operations, and any compliance improvement initiatives.



## WRITTEN POLICIES, PROCEDURES, AND CODE OF CONDUCT

CHESS's overall expectations for all individuals or entities performing functions or services related to CHESS activities conduct begins with the Company's commitment to comply with all Federal and State laws, regulations, standards, and other program requirements. CHESS has policies and procedures that establish compliance expectations and implement the operations of its compliance program.

CHESS maintains policies and written guidelines that:

- Provide guidance on dealing with suspected, detected, or reported compliance issues;
- Identify how to communicate compliance issues to appropriate compliance personnel;
- Describe how suspected, detected, or reported compliance issues are investigated and resolved by CHESS; and
- Include a policy of non-retaliation for good faith participation in the compliance program, including, but not limited to, reporting potential issues, investigating issues, and reporting to appropriate officials.

### WRITTEN POLICIES AND PROCEDURES

#### CHESS CORPORATE POLICIES AND PROCEDURES

CHESS has developed compliance policies and procedures that support the Code of Conduct and this Compliance Plan. These policies and procedures describe the operation of the Compliance Plan and are designed to detect instances of noncompliance through identification and response to risk areas. Because risk areas evolve and change over time, CHESS's policies and procedures are reviewed at least annually or more often to incorporate changes in applicable laws, regulations, and other program requirements.

Each subsidiary will maintain its own Compliance Plan, policies, and procedures in accordance with the ACO's specific applicable rules and regulations. In addition, each ACO has adopted and relies upon several policies and procedures of the CHESS Compliance Plan, which are incorporated into the ACO's individual Compliance Plan. In addition, the ACO may utilize certain compliance processes established by CHESS, including the use of the CHESS Anonymous Reporting Hotline and internal compliance audits by CHESS compliance staff of ACO parties.

The CHESS Board of Managers will meet at least four times annually, and at one meeting will discuss and approve any changes, if necessary, to this or any other Compliance Plan documents.

#### ACO COMPLIANCE POLICIES AND PROCEDURES

The CHESS Code of Conduct and this CHESS Compliance Plan are the foundation of each ACO's Compliance Plan. Personnel may obtain copies of these and other Compliance Plan documents from



the CHES employee shared drive and the ACO Compliance Official.

Each ACO may develop and implement formal, written Compliance Policies and Procedures to describe in more detail the existing ACO compliance processes and procedures and to underscore the ACO's commitment to compliance.

## CHES CODE OF CONDUCT

The CHES Code of Conduct articulates its commitment to conduct business in a lawful and ethical manner in compliance with all applicable federal and state laws and defines the underlying framework for the compliance policies and procedures. The Code of Conduct describes the Company's expectations that all individuals performing functions on behalf of CHES conduct themselves in an ethical manner; that issues of suspected or actual noncompliance and fraud, waste, and abuse are reported through appropriate mechanisms; and that reported issues will be addressed and corrected. This includes, but is not limited to, all applicable Medicare Shared Savings Program ("MSSP") and any other value-based care Medicare or Medicaid models.

The Code of Conduct is approved by the CHES Board of Managers and is designed to guide employees and other entities or individuals performing functions on behalf of CHES in upholding our high standards of fair and ethical practices.

All CHES employees, Board of Director members, and entities performing functions or services related to CHES activities must comply with the Code of Conduct. Adherence to the Code of Conduct is an essential component of the Compliance Plan.

## HIPAA PRIVACY PROGRAM

### INFORMATION PRIVACY

CHES is committed to protecting the privacy and confidentiality of all medical, financial, and business information generated during the normal course of our business. As such, CHES has adopted Information Privacy Policies to communicate and ensure consistent and best practices regarding all beneficiary, third-party, and confidential and proprietary information held or owned by CHES. All individuals performing functions on behalf of CHES are required to complete training at the time of hire and annually thereafter on our privacy and security policies.

#### *What is Confidential?*

Information about internal operations, beneficiary identifiable information, proprietary or intellectual property of CHES or CHES ACO participants, and all other materials created, recorded, implemented and/or practiced by CHES or CHES clients is considered confidential. Federal law, such as the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the HITECH Act protect certain beneficiary information. Individual state laws, such as the North Carolina Identity



Theft Protection Act also protect certain beneficiary information. The CHES Compliance Department has adopted policies and procedures that describe in detail how to use and protect beneficiary's information privacy.

#### *What if Confidentiality is Breached?*

Any breach of beneficiary confidentiality must be reported to the Compliance Officer or Compliance Department as soon as reasonably practicable for investigation. Many methods of reporting are available, including direct phone, email, or in person, or by submitting an anonymous report via the CHES Anonymous Hotline.

#### *Subcontractors*

All subcontractors must maintain privacy policies or demonstrate they have appropriate processes in place to ensure all individuals within the respective entity are trained on HIPAA regulations and the process for reporting privacy breaches.

### INFORMATION SECURITY

As a recipient of protected health information (PHI) and personally identifiable information (PII) from a variety of sources, including the Centers for Medicare and Medicaid Services (CMS), health care providers, and health plans, CHES will be a responsible steward of the PHI and PII CHES receives. This stewardship includes complying with applicable federal and state laws, data use agreements, business associate agreements to which CHES has agreed, as well as other applicable industry regulations. With respect to information security, CHES's compliance obligation(s) includes, but is not limited to:

- [The HIPAA Security Rule](#)
- [The NC Identity Theft Protection Act](#)

All individuals doing work on behalf of CHES are expected to use computing resources ethically and securely in accordance with CHES's Compliance Plan and related policies, standards, and procedures. Any employee with a security question or concern should contact CHES's HIPAA Security Officer or designee. All individuals are expected to familiarize themselves with Information Security Policies, Standards, and Procedures.

### FRAUD, WASTE, AND ABUSE

CHES endeavors to ensure that all individuals doing work on behalf of CHES and all CHES affiliates, vendors, and suppliers will comply with all applicable fraud, waste, and abuse laws, including but not limited to federal criminal law, the False Claims Act, the Anti-Kickback Statute, the Civil Monetary Penalties law, and the Physician self-referral law(s) ("Stark"). CHES will require individuals or entities performing functions or services related to CHES's activities contractually agree with the above laws.





Routine monitoring and auditing are critical to success. The Compliance Department will periodically review aspects of the organization's operations, especially in areas that have been identified by CMS or any other government enforcement agency as potentially problematic for entities participating in ACOs.

Where appropriate, CHESS has developed policies and procedures to ensure:

- CHESS appropriately interacts with and refers beneficiaries, including developing policies regarding appropriate referrals of at-risk beneficiaries;
- Published marketing materials are accurate and not misleading;
- CHESS complies with beneficiary notification requirements;
- CHESS ensures the preservation and facilitation of beneficiary freedom of choice;
- CHESS ensures beneficiary access to all covered services;
- Appropriate and accurate record retention under state and federal law;
- Compliance with conflict and potential kickback issues, specifically including receipt and distribution of gifts and gratuities whether involving CHESS employees, contractors, providers/suppliers, professionals and participants, or ACO beneficiaries;
- Proper utilization and implementation of appropriate provider recruiting, retention, and contracting activities;
- Appropriate monitoring of joint ventures between CHESS and non-exempt provider entities.

CHESS will routinely monitor, not engage in, and will discontinue business relationships with any individual, vendor, or provider who has been excluded or debarred from state or government programs.



## GOVERNANCE STRUCTURE

### CHESS BOARD OF MANAGERS

The CHES Board of Managers leads the future endeavors of CHES. As the governing body of CHES, the Board of Managers has ultimate responsibility for oversight of the CHES Compliance Plan, which includes Compliance Plans for each subsidiary. This oversight will include at least a review and yearly approval of the Compliance Plan to ensure consistency with the culture and ethics of CHES.

### COMPLIANCE AND ENTERPRISE RISK COMMITTEE

The Compliance and Enterprise Risk Committee (the “Committee”) shall assist the Board of Managers in carrying out its responsibilities relating to CHES’s monitoring of its regulatory compliance and corporate ethics, the development of management plans to address enterprise risk in a methodological manner, in addition to any other responsibilities that may be assigned from time to time by the Board. The Committee shall oversee compliance and risk programs for CHES, including a review of the compliance posture of subsidiary organizations.

### ACCOUNTABLE CARE ORGANIZATION BOARD OF MANAGERS

Each ACO has its own governing body that has ultimate responsibility for oversight of the ACO’s specific Compliance Plan. As such, the CHES Board of Managers will approve any substantive ACO related changes to the Compliance Plan, Code of Conduct, or the ACO’s Compliance Plan. In addition, the CHES Board of Managers will receive periodic reports from the Compliance Official as to the operation of the Compliance Plan, as well as to the investigation and resolution of any material compliance issues that may arise.

### COMPLIANCE OFFICER

The Compliance Officer is responsible for the compliance responsibilities of the company. The Compliance Officer will report directly to the CHES Board of Managers and will render direct communication to the Board of Managers on the progress of the Compliance Plan periodically and as needed, no less than annually.

### PRIVACY PROGRAM MANAGER

The Privacy Program Manager will serve as the HIPAA Privacy Official for CHES and each of its wholly owned subsidiaries and will report to the Compliance and Enterprise Risk Committee on a regular basis. The Privacy Program Manager will report to the CHES Corporate Secretary and the CHES President. The Privacy Program Manager will be responsible for staying abreast of information privacy laws relevant to CHES operations, coordinating with other leaders to maintain current policies and procedures related to PHI, overseeing HIPAA Privacy and Security education for CHES, and will be the



primary lead on investigation of and remediation of any Privacy incidents.

#### CHIEF TRANSFORMATION OFFICER

The Chief Transformation Officer, when a separate individual from the President, will report to the President and be responsible for the management and oversight of the assessment and implementation of value-based care for CHESS clients. The Chief Transformation Officer will work with other leadership to identify new clients, assess their needs for a move to value, and implement the process.

#### CHIEF FINANCIAL OFFICER

The Chief Financial Officer (CFO) will report directly to the President and be responsible for the company's finances and internal audit. The CFO will also be responsible for maintaining the finances of the subsidiary companies in compliance with the MSSP regulations and other federal programs.

#### VICE PRESIDENT OF HEALTH INFORMATICS

The VP of Health Informatics will serve as the HIPAA Security Official for CHESS and its wholly owned subsidiaries unless an applicable subsidiary elects otherwise.

#### ACCOUNTABLE CARE ORGANIZATION COMPLIANCE OFFICIAL

The CHESS Accountable Care Organization Compliance Official (CO) is the Compliance Strategy Director. The CO is not and will not be legal counsel to CHESS or any CHESS ACO. The CO shall periodically report directly to the ACO governing authority. The CO will oversee established procedures to allow ACO employees, contractors, and participants to report any compliance issues. The CO or delegate will provide compliance education to appropriate ACO employees and provide channels for all employees to report suspected violations to CHESS and/or appropriate law enforcement agencies.



## TRAINING AND EDUCATION

Training and education are important elements in CHESS's overall compliance plan. At CHESS, compliance training is not optional and refresher training occurs on an annual basis, or more frequently if training is updated as a result of changes in regulatory requirements or business needs.

### COMPLIANCE TRAINING REQUIREMENTS

Policies relating to compliance, including information privacy and security, are reviewed at least annually to ensure they are current with changing regulatory requirements and/or emergent risks. As CHESS provides information systems access to its partners, the partners follow the information security policies of CHESS. CHESS will ensure communication of revisions to its partners, participants, participant employees, managers and contractors, as appropriate. CHESS will ensure annual compliance training for all current partners occurs, including ACO Participants, ACO Participant employees, managers, and contractors.

### COMPLIANCE TRAINING FOR ACO PROVIDERS/SUPPLIERS

All participants, preferred providers, and other individuals or entities performing functions or services related to CHESS activities will receive training regarding this Compliance Plan and the requirements imposed on the ACO under the law upon becoming employed or engaged by the ACO and at least annually thereafter.

All participants, preferred providers, and other individuals or entities performing functions or services related to CHESS activities will receive a copy of this Compliance Plan and be contractually committed to adhering to the Compliance Plan and any applicable laws and regulations therein.

Training will include the following topics:

- Physician Self-Referral, Anti-Kickback Statutes, and Civil Monetary Penalties Law/Applicable Waivers
- Reporting and Investigating Suspected Violations and Complaints
- Data Sharing, Privacy and Information Security Requirements, and Information Blocking and Interoperability standards where appropriate
- Beneficiary Inducements
- Marketing Requirements
- Conflict of Interest Requirements
- Records Retention Requirements
- Non-retaliation

CHESS educates employees, beneficiaries, ACO parties, and third parties through:

- New Hire Orientation for internal workforce members;



- Mandatory Compliance Training Course taken annually;
- Monthly staff education bulletins;
- CHESS public facing website: [www.chesshealthsolutions.com](http://www.chesshealthsolutions.com)
- Posters displayed in common work areas; and
- CHESS policies and procedures.



## EFFECTIVE LINES OF COMMUNICATION

CHESS believes its employees are the first line of defense in identifying, reporting, and correcting problematic behavior. Those performing work on behalf of CHESS, clients, suppliers, and providers are required to report any behavior or conduct that appears inconsistent with our Compliance Plan, a probable violation of any law or regulation, any perceived conflict of interest, or behavior that appears unethical. To facilitate prompt reporting, we have provided contact numbers, including an anonymous reporting line to alleviate fears of any form of retaliation. CHESS will promptly and thoroughly investigate all reports regarding potential violations of any policy, law, or regulation.

### INTERNAL REPORTING

CHESS believes its clients, ACO providers, and other individuals or entities performing functions or services related to CHESS activities have an affirmative duty to report in good faith any known or suspected violations of applicable law, any behavior or conduct that appears inconsistent with our Compliance Plan, any perceived conflict of interest, or behavior that appears unethical.

### CHESS REPORTING HOTLINE

The CHESS Health Solutions Hotline is a confidential, toll-free resource available to employees, beneficiaries, ACO Parties, and third parties twenty-four hours a day, seven days a week to report violations of, or raise questions or concerns relating to CHESS policies or the Code of Conduct.

#### **CHESS Reporting Hotline:**

**1-844-400-7620**

[chesshealthsolutions.ethicspoint.com](https://chesshealthsolutions.ethicspoint.com)

Calls to the CHESS Hotline can be made anonymously. Calls are never traced or recorded. All calls to the hotline are reviewed and investigated by the Compliance or Human Resources Department. CHESS audits calls to the hotline to ensure proper investigation and resolution of reported matters and to identify patterns and opportunities for additional training or corrective action.

### REPORTING MECHANISMS

CHESS has established reporting mechanisms as a means for participants, providers, contractors, suppliers and any other entity performing functions or services related to CHESS or other ACO activities to report suspected compliance issues or make inquiries. All have the right to use the reporting mechanisms. This includes by phone to the Compliance Official or HR Department, via email to [hipaa@chesshealthsolutions.com](mailto:hipaa@chesshealthsolutions.com) or <mailto:compliance@chesshealthsolutions.com>, or via the anonymous reporting hotline.



CHESS encourages anyone who may have a compliance concern or inquiry to report in whatever manner is most appropriate and comfortable for them in their given circumstances and should feel free to contact the Compliance Official directly. Reports made to the Corporate Secretary will be treated confidentially.

#### NON-RETALIATION

CHESS is committed to a policy of non-retaliation against clients, contractors, suppliers, and any other individual or entity performing functions or services related to CHESS activities who report suspected violations or make inquiries in good faith. Individuals shall not be intimidated or retaliated against in response to their good faith adherence to this Compliance Plan. Any action taken by CHESS staff to retaliate against anyone making a good faith report alleging suspected noncompliance is strictly prohibited. Any staff member who commits or condones any form of retaliation will be subject to discipline up to and including termination of employment. Please see the CHESS non-retaliation policy for more information.

#### EXTERNAL REPORTING

If CHESS discovers from any source of credible evidence of misconduct related to CHESS's operations and performance and, after a reasonable inquiry finds that the misconduct represents a probable violation of the law, CHESS will promptly report the probable violation to the appropriate law enforcement agency within the appropriate period.



## MONITORING AND AUDITING

CHESS has established protocols to ensure 1) compliance risks are identified and investigated, and 2) effective monitoring and auditing of its internal processes.

### RISK ASSESSMENT

On an annual basis, the Compliance Department performs an assessment of CHESS's major compliance areas. Identified risks are ranked in order to determine which risk areas will have the greatest impact on CHESS. The baseline risk assessment is reviewed periodically and updated as deemed appropriate.

### AUDITING AND MONITORING WORK PLAN

The Compliance Department uses the results of the risk assessment in the development of the CHESS Work Plan ("Work Plan"). The Work Plan lists the auditing and monitoring activities to be conducted by or on behalf of CHESS departments. The activities included in the Work Plan are designed to test and confirm compliance with regulations, contractual arrangements, and applicable state and federal laws, as well as associated internal policies and procedures.

### EXCLUSION SCREENING AND MONITORING

CHESS will routinely monitor and not knowingly contract with any individual, entity, vendor, or provider who has been excluded or debarred from state or federal health care programs. All CHESS clients are required to screen their providers against the Office of Inspector General (OIG) List of Excluded Individuals and Entities and the U.S. General Services Administration's Excluded Parties List System prior to establishing any contractual relationship and annually thereafter.

CHESS staff and clients must immediately notify the Compliance Department of the identification of any person or entity who provides services to or on behalf of CHESS that:

- 1) Has been excluded according to the above federal lists;
- 2) Has been subject to any conviction or adverse action that subjects the individual to federal health care exclusion under 42 U.S.C. § 1320a-7; or
- 3) Has a history of health care program integrity issues, including any history of Medicare program exclusion or other sanctions and affiliations with individuals or entities that have a history of program integrity issues.

CHESS will immediately remove any excluded individual from any work related directly or indirectly to services furnished by CHESS.





## AUDITING BY FEDERAL AGENCIES OR EXTERNAL PARTIES

CHESS views audits and reviews by regulatory agencies and other external parties as an opportunity to confirm its ongoing compliance efforts are effective and successful. In cases where an audit outcome indicates CHESS has not met a regulatory requirement, CHESS uses the audit findings to perform root cause analysis and develop corrective action plans to address identified areas of noncompliance. CHESS may also contract with external companies to perform compliance related reviews and assist with changes to help drive the organization's compliance.



## CONFLICTS OF INTEREST

CHESS believes that under no circumstances should CHESS staff, Board of Managers members, or contractors place their own financial interest above the welfare of patients. We actively screen relationships with third parties and train and educate to maintain unbiased, professional, and patient-centered programs throughout CHESS.

**Duty to Disclose.** To ensure our employees have every opportunity to avoid conflicts of interest, CHESS has clear guidelines regarding disclosure. Each officer, director, and board members are obligated to disclose their own conflict of interest or any appearance of a conflict of interest to their supervisor or the Compliance Department. We encourage those who may have questions about a situation to disclose the pertinent details, preferably in writing, to their supervisor or the Compliance Department.

**Use of Position.** CHESS staff, Board of Managers members, or contractors and suppliers should avoid profiting or helping others to profit from confidential information or business opportunities that are available because of employment by CHESS. Similarly, CHESS staff, Board of Managers members, or contractors should avoid influencing or attempting to influence a business transaction between CHESS and another entity in which any participant or provider has a direct or indirect financial interest or acts as a director, officer, employee, partner, agent, or consultant.

**Gaining Preferential Treatment.** CHESS staff, Board of Managers members, or contractors should avoid providing a service to a competitor, a proposed or present supplier, or customer for gaining preferential treatment.

**Gifts, Payments and Compensation.** CHESS staff, Board of Managers members, or contractors should avoid soliciting or accepting gifts, payments, loans, services, or any form of compensation from suppliers, customers, competitors, or others seeking to do business with CHESS. All business dealings must be at arm's length and free of any favorable treatment resulting from the personal interest of an employee.

**Confidential Information.** CHESS staff, Board of Managers members, or contractors should avoid buying or selling securities of any other company using non-public information obtained in the performance of our CHESS duties or providing such information to others. Similarly, all confidential, proprietary, or intellectual property information that relates to CHESS or business related to CHESS is confidential. We have a duty to keep that information privileged within our organization and to use it for our organization's best interest. All conflicts or suspected conflicts relating to such information should be reported to the Compliance Department or Corporate Secretary.



## CORRECTIVE ACTION PLANS

CHESS's compliance with its legal and ethical duties depends on the actions of CHESS staff, Board of Managers members, and contractors. Compliance with all applicable laws and regulations is a requirement for all CHESS staff, contractors, and any other entity performing functions or services related to CHESS activities.

### CORRECTIVE ACTION PLAN

Whenever a compliance problem has been identified, the Compliance Department will develop, in consultation with appropriate management, a corrective action plan identifying the steps necessary to correct the problem and reduce the likelihood it will recur or similar problems will occur in other areas or departments. A corrective action plan shall be tailored to address the compliance problem in light of its scope and seriousness. The Compliance Department shall obtain advice and guidance from leadership, business leaders, or other third parties as appropriate. Corrective action plans may consider the following matters:

- The need for education to reduce the potential for recurrence
- Whether changes are required to policy and procedure
- Whether responsible parties should be disciplined
- Whether any repayment is required to third-party payers
- The manner in which the corrective action plan will be communicated to responsible parties, affected departments, and management
- Corrective action related to other identified issues

Corrective action plans shall be maintained by the Compliance Department. The Compliance Department shall periodically review corrective action plans to determine the status and effectiveness of the plan.



## COMPLIANCE RESOURCES

There are several resources available to assist you when you have a compliance question or require advice about the topics discussed in this Compliance Plan. Resources include:

### USEFUL CHESS RESOURCES

1. CHESS Information Privacy, Security, and Services Policies
2. Employee Handbook
3. CHESS Reporting Hotline: 1-844-400-7620 or [chesshealthsolutions.ethicspoint.com](https://chesshealthsolutions.ethicspoint.com)

### USEFUL EXTERNAL EDUCATION RESOURCES

1. HIPAA [Question and Answer](#)
2. Helpful Compliance [Educational Materials](#) from Office of the Inspector General
3. CMS [ACO Information Website](#)
4. CMS [ACO Programs](#) Website
5. CMS [Medicare Shared Savings Program](#) Website

