



**Title:** Functions of the Compliance Committee Policy

**Date Created:** March 1, 2015

**Date Modified:** May 9, 2025

**Date Approved by CCN Board of Directors:** June 10, 2025

**Date Approved by CCC Board of Directors:** September 24, 2024

**Date Approved by IPA Board of Directors:** September 24, 2024

**Policy#** CC2

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**Purpose:**

To outline the authority and obligations of the Care Compass Entities' Compliance Committees in the development of standards of compliance for the Care Compass Entities Affected Individuals.

**Definitions:**

**Affected Individual(s):** All persons who are affected by Care Compass Entities' risk areas including Care Compass Entities' employees, officers, Directors, managers, contractors, agents, subcontractors, independent contractors, governing bodies, or third-parties, who or that, in acting on behalf of the Care Compass Entities: (i) delivers, furnishes, directs, orders, authorizes, or otherwise provides health or social care items and services under State, Federal, or Care Compass programs; and (ii) contributes to the Care Compass Entities' entitlement to payment under Federal health or social care programs, or from other payor sources.

**Care Compass Entities:** Organizations that are directly, or indirectly through one or more intermediaries, owned or controlled by, or are under common ownership or control of, Care Compass Network, including Care Compass Collaborative, Inc. and Care Compass Supporting IPA, LLC .

**Participant:** Any organization that has signed an agreement related to a funded program with the Care Compass Entities.

**Staff:** Employees, contractors, agents, consultants, volunteers, and others who act on the Care Compass Entities' behalf.

**Policy:**

To assist the Board of Directors ("Board") in fulfilling the Board's oversight responsibility and support the Director of Compliance in meeting their responsibilities, the Care Compass Entities will establish and maintain Compliance Committee(s).

- I. Authority.** The Compliance Committees are standing committees of the Care Compass Entities. The Compliance Committees serve to support the Director of Compliance and will report directly to and be accountable to the Care Compass Entities Executive Director ("ED") and the applicable Boards on matters relating to the Care Compass Entities' Compliance Programs.

- II. Compliance Committee Charter.** The Compliance Committees will outline the duties and responsibilities, membership, designation of a Compliance Committee chair and the frequency of meetings in a Compliance Committee Charter.
- III. Membership.** Membership in the Compliance Committees will, at a minimum, be comprised of senior managers and representatives from Participants' compliance program and finance teams. The Compliance Committees will meet no less frequently than quarterly.
- IV. Duties.** As part of its duties, the Compliance Committees will coordinate with the Director of Compliance and assist in the implementation of the Compliance Program in accordance with the Care Compass Entities' Bylaws. The Compliance Committees' functions will include, but not be limited to:
- a. **Assessing the Effectiveness of the Compliance Program:** The Compliance Committees will coordinate with the Director of Compliance to assess the effectiveness of the Compliance Program and annually review the Compliance Work Plan and the Office of Medicaid Inspector General (OMIG) Compliance Program Self-Assessment Form to determine whether the Compliance Program meets the objectives and to ensure the Care Compass Entities are conducting business in an ethical and responsible manner, consistent with its Compliance Program.
  - b. **Identifying Areas of Risk.** The Compliance Committees will assist the Director of Compliance in identifying areas of risk and measures to address such areas of risk. In addition, the Compliance Committees will analyze issues affecting the transformation of care delivery, the health care industry generally, and the legal requirements with which the Care Compass Entities must comply.
  - c. **Monitoring Audits and Investigations.** The Compliance Committees will monitor the results of internal and external audits and investigations for the purpose of identifying and addressing potential risk areas and will recommend appropriate corrective and preventive action.
  - d. **Policies and Procedures.** The Compliance Committees will work with the Director of Compliance to develop and update the Code of Conduct, written standards, and policies and procedures that address areas of risk and promote compliance with the Care Compass Entities' Compliance Programs and applicable laws and regulations.
  - e. **Implementation.** The Compliance Committees will assist the Director of Compliance in recommending and monitoring internal systems and controls that seek to ensure compliance with the Care Compass Entities' Codes of Conduct, written standards, policies and procedures, and applicable laws and regulations.
  - f. **Developing Strategy.** The Compliance Committees will analyze and, as needed, develop and advocate for adoption and implementation of new methods for promoting compliance and identifying potential violations and for soliciting, evaluating, and responding to complaints and reports of alleged non-compliance.
  - g. **Resources.** The Compliance Committees will periodically review the resources assigned to the Care Compass Entities' compliance efforts to assess their adequacy for maintaining the Compliance Program's ongoing effectiveness and advocate for the allocation of sufficient funding, resources, and Staff for the Director of Compliance to fully perform their responsibilities.

- h. **Communication.** The Compliance Committees will coordinate with the Director of Compliance to ensure communication and cooperation by Affected Individuals on compliance related issues, internal or external audits, or any other function or activity required by applicable laws and regulations.
- i. **Training.** The Compliance Committees will coordinate with the Director of Compliance to ensure required training topics are timely completed by Affected Individuals.
- j. **Charter Review.** The Compliance Committees will, no less than annually, coordinate with the Director of Compliance to review and make necessary updates to the Compliance Committee Charter.
- k. **External Auditor.** The Compliance Committees will be responsible for recommending an External Auditor to the applicable Board of Directors.

**CCN Board Approval History:** 3/11/2015, 12/8/2015, 12/21/2017, 2/12/2019, 11/10/2020, 11/9/2021, 11/08/2022, 8/08/2023, 8/13/2024, 6/10/2025

**CCC Board Approval History:** 9/24/2024

**IPA Board Approval History:** 9/12/2023, 9/24/2024

**Committee Committee Review History:** 12/8/2015, 10/28/2016, 11/17/2017, 1/18/2019, 11/15/2019, 10/16/2020, 10/15/2021, 11/01/2022, 7/28/2023, 7/24/2024, 5/22/2025

#### **Policy Revisions:**

<b>Date</b>	<b>Revision Log</b>	<b>Updated By</b>
3/1/2015	Original creation	Anne Homer
11/19/2015	Updated to reflect Care Compass Network organization structure	Rebecca Kennis
11/3/2016	Added Board Review History	Andrea Rotella
11/17/2017	Updated with changes by the Compliance and Audit Committee	Andrea Rotella
1/18/2019	Updated with changes by the Compliance and Audit Committee	Andrea Rotella
10/16/2020	Removal of references to DSRIP	Andrea Rotella
8/23/2022	Added Partner definition, updated Partner Organization to Partner and Corporate and Compliance and Privacy Officer title throughout	Cathy Petrak
7/14/2023	Updated Partner definition to Participant and Director of Compliance title throughout	Cathy Petrak
9/5/2024	Updated to an Enterprise-wide policy	Cathy Petrak
5/9/2025	Updated “Affiliated Entities” to “Care Compass Entities” throughout. added “Affected Individuals” definition and updates where applicable; added Charter, membership, communication, and training responsibilities and requirements	Cathy Petrak

**This Policy shall be reviewed periodically, but not less than once every 12 months, and updated consistent with the requirements established by the Board of Directors, Care Compass Network’s Leadership Team, Federal and State law(s) and regulations, and applicable accrediting and review organizations.**

