

CAREGIVER HANDBOOK

for Caregivers in the
Agency-Based Personal Assistance Services Option

Revised May, 2024



EVERY LIFE. EVERY MOMENT. EVERY DAY.

www.ConsumerDirectCare.com



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Changes to Your Hours

Benefits are offered to caregivers based on their average hours worked each week. If you experience a change in your regular hours, and the change is expected to last for **more than 3 months**, please let us know! You only need to inform us of the change if your hours will switch **between** these categories:

- Full-time (30+ hours/week)
- Part-time (10-29 hours/week)
- Less than 10 hours/week

Examples of when to contact Consumer Direct:

- 1) You have been working about 15 hours/week. You picked up a new permanent client and will now be averaging around 32 hours/week for the foreseeable future.
- 2) You have been working around 20 hours/week, but are switching over to a back-up caregiver.
- 3) One of your clients discharges from services, reducing your weekly hours from 38 to 22, and you are not interested in picking up a new client.

Examples of when you do **NOT** need to contact Consumer Direct:

- 1) Your hours have increased from 16 hours/week to 25 hours/week. Since you are not switching between benefit categories, no action is required.
- 2) You have been working about 20-25 hours/week, but have been working more for the past few weeks to cover for another caregiver. Since this change is not expected to last for more than 3 months, no action is required.
- 3) You typically work 32 hours/week, but your client has been admitted to the hospital. This is not a permanent change, so no action is required.
- 4) One of your clients discharges from services, reducing your weekly hours from 38 to 22. You find another client 2 months later, and your hours return to 38 hours/week. The change did not last more than 3 months, so no action is required.

You may experience a change in your hours that was supposed to be temporary, but ends up lasting longer than 3 months. In these instances, please contact us to let us know your new weekly hours.

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WELCOME!

This Handbook has been prepared to help you get acquainted with our Company. It should answer many of your initial questions about general operating procedures associated with Consumer Direct Personal Care, LLC doing business as Consumer Direct Care Network Montana Caregiving (CDCN).

Our goal is to provide the finest quality services to all of our customers in an efficient and productive manner. If anything contained in this Handbook is unclear, please discuss your questions with your Nurse Supervisor, Scheduler, or a Human Resources Associate.

We are proud of the success of CDCN. It is our belief that these accomplishments are the result of dedication, hard work, and good communication.

We hope that you will find your association with CDCN a rewarding experience.

MISSION STATEMENT

Provide quality service to individuals and families so they can remain in their homes and communities.

Consumer Direct Care Network Montana Caregiving Contact Information

<u>Billings</u>	100 Brookshire Blvd, Bldg 1, Unit 2, 59102	(406) 651-5240	866-765-5240	Fax: 651-5241
<u>Great Falls</u>	527 18 th Ave NE, 59404	(406) 452-3014	866-322-3014	Fax: 452-3016
<u>Missoula</u>	100 Consumer Direct Way, Suite 120, 59808	(406) 541-1700	866-438-8591	Fax: 541-1703

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IMPORTANT NOTICE TO EMPLOYEES

The policies, procedures and programs outlined in this Handbook are designed to serve as guidelines to acquaint employees with information regarding their employment.

No policy or provision in this Handbook is intended to create an express or implied contract binding the employee or CDCN to an agreement of employment for a specific period of time. Either the employee or the employer can terminate at any time during the probationary period (first 180 days) for any reason, with or without cause or notice.

CDCN reserves the right, in its sole discretion, to supersede, modify, revoke, suspend, terminate, revise, or deviate from the policies, procedures, guidelines and programs and information in this Handbook as circumstances or situations warrant, in whole or in part, at any time with or without cause.

No representative or agent other than the Operations Manager or Human Resources Manager can authorize or sign an employment agreement contrary to the above terms or otherwise make any binding offer of employment for a specific term. To be effective, any agreement altering the terms and provisions of this Handbook must be in writing and signed by the Operations Manager or Human Resources Manager.

Employees are expected to accept responsibility for familiarizing themselves with the information in this Handbook and to seek verification or clarification of its terms or guidance when necessary. Employees should consult their supervisor or CDCN Operations Manager if they have any questions that are not answered in this Handbook. This Handbook supersedes and replaces all previous versions.

OVERVIEW OF HUMAN RESOURCES STANDARDS & DEFINITIONS

NON-DISCRIMINATION IN EMPLOYMENT

CDCN complies with federal and state laws regarding non-discrimination in employment. Applicants are considered for employment and hired without discrimination because of race, color, religion, gender, national origin, age, marital status, military status, physical or mental disability/handicap, or any other characteristic protected by law.

EQUAL OPPORTUNITY EMPLOYMENT

In order to provide equal employment and advancement opportunities to all individuals, employment decisions at CDCN will be based on merit, qualifications, skills, and abilities. CDCN does not discriminate in employment opportunities or practices on the basis of race, color, religion, gender, national origin, age, marital status, military status, physical or mental disability/handicap, or any other characteristic protected by law.

Pursuant to the Americans With Disabilities Act, CDCN will make reasonable accommodations for qualified individuals with known disabilities unless doing so would result in undue hardship. This policy governs all aspects of employment, including selection, job assignment, compensation, advancement, discipline, termination, training, and access to benefits.

Applicants or employees with questions or concerns about any type of discrimination in the workplace are encouraged to bring these issues to the attention of their immediate supervisor or the Human Resources Manager. Employees can raise concerns and make reports without fear of reprisal. Anyone found to be engaging in any type of unlawful discrimination will be subject to disciplinary action, up to and including termination of employment.

HIRING REQUIREMENTS

- Completed Application
- Valid Driver's License
- PCA or C.N.A. Certification
- Interview
- Pass Nationwide Background Check
- Pass Physical Therapy Evaluation
- Pass Office of Inspector General Inquiry

COMMUNICABLE DISEASES

Communicable diseases are regarded as physical disabilities. CDCN will not discriminate against any applicant or employee who has a communicable disease; however, reasonable demands of a job/position may render an applicant or employee ineligible for employment. CDCN will evaluate all factors after obtaining the reasonable medical judgment of health officials, and will evaluate the nature, duration, and severity of the risk of any communicable disease to determine if an individual is qualified for employment.

HARASSMENT/SEXUAL HARASSMENT

All forms of harassment, including any degrading work assignments, words, or actions toward an individual or an individual's race, color, religion, gender, age, or national origin, are prohibited. It is specifically emphasized that sexual harassment in any form is expressly prohibited. It is your responsibility to report **any** harassing behavior to your supervisor immediately. If the employee has any reason to feel that they cannot report the harassment

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to their supervisor, they may take their concerns directly to the Human Resources Manager. Such reports can be made without fear of reprisal. All reports of harassment shall be investigated promptly. Sexual harassment includes unwelcome verbal or physical conduct when:

- Submission to the conduct is implicitly or explicitly made a term or condition of employment
- Submission to or rejection of the conduct is used as the basis for an employment decision affecting the individual, or
- The conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

Sexual harassment also includes:

- Harassment directed toward a person because of gender
- A pattern of favoritism toward sexual partners

Examples of prohibited sexual harassment include, but are not limited to:

- Propositions or pressure to engage in sexual activity
- Sexual assault
- Repeated intentional bodily contact
- Repeated sexual jokes, innuendoes, or comments
- Constant or inappropriate staring or leering
- Inappropriate comments concerning appearance
- Display of magazines, books, or pictures with a sexual connotation

RETALIATION

Neither CDCN nor any employee will retaliate against any applicant, employee, or past employee for opposing unlawful discriminatory practices, filing a discrimination complaint, or participating in any other manner in a discrimination proceeding.

LICENSING STANDARDS / REGULATIONS

CDCN and its employees may be governed by certain regulations and licensing requirements. You must be knowledgeable of, and abide by, all regulations and professional standards applicable to your position. You are responsible for staying current with all laws pertaining to any professional licensing. You may request assistance from Human Resources to meet necessary requirements.

PROBATIONARY PERIOD

For each new employee and each employee who is promoted and/or moved to a new position or rehired, the first one hundred eighty (180) days are a probationary period. This period is established as a time of adjustment for you to learn the job requirements and work rules. During this time, you may be terminated with or without cause. CDCN reserves the right to extend an employee's probationary period up to an additional ninety days (90), to give the employee an opportunity to achieve satisfactory performance. Any significant absence shall automatically extend a probationary period by the length of the absence.

EXEMPT / NON-EXEMPT STATUS

Each employee is designated as either non-exempt or exempt from federal and state wage and hour laws. Non-exempt employees are entitled to overtime pay under the specific provisions of federal and state laws. Exempt employees are specifically addressed in the provisions of federal and state wage and hour laws. An employee's exempt or non-exempt classification may be changed only upon written notification by CDCN management.

CORE EMPLOYEE

A core employee is an employee working under an individual employment contract. They may be exempt or hourly. In addition to providing regular client services, a Core PCA performs on-call duties and other administrative tasks, as requested. Refer to the Core PCA job description for a complete description of the requirements for this position.

REGULAR FULL-TIME EMPLOYEE

A regular full-time employee is one who works an annual average of forty (40) hours per week. Additional hours may be required based on the needs of CDCN.

REGULAR PART-TIME EMPLOYEE

A regular part-time employee is one who works a minimum of twenty (20) hours per week.

CASUAL EMPLOYEE

A casual employee is one who is employed, full-time or part-time, for a specific job assignment with limited duration, or during certain periods of time, depending upon the demand of work as determined by CDCN.

WAGE AND SALARY

You will receive a rate of pay commensurate with your job position. Consideration for pay adjustments will be at the discretion of your supervisor.

PAY PERIOD / PAY DAY

The pay period is every two weeks, Sunday through Saturday. See CDCN's Payroll Schedule for a listing of Pay Days. Payroll advances are not available.

EMPLOYEE NAME BADGE

Every employee will be given a name badge, and it is mandatory that it be worn at every scheduled shift.

HOURS OF WORK

Regular office hours are from 8am to 5pm, Monday through Friday. CDCN's field services run 24 hours a day, seven days a week. Work periods may vary from assignment to assignment and may require overtime. Each non-exempt employee is required to know his/her work schedule and be in attendance, as assigned. Exempt employees are expected to meet the requirements of their jobs, which may necessitate varied hours of work.

RESIGNATION

A resignation is the voluntary decision of an employee to terminate employment with CDCN. A written notice of resignation should be given to the employee's supervisor two (2) weeks prior to the anticipated termination date.

LAYOFF / REDUCTION IN STAFF

If a reduction in staff becomes necessary, CDCN will give full consideration to skills, aptitudes and past work performance in determining work force adjustments. All rehired employees will be classified as new hires.

PAY DAYS AND FINAL PAY

The pay period is bi-weekly. When you voluntarily terminate (resign) your employment, your final pay will be issued on the next regularly scheduled payday, or fifteen (15) days from the date of the actual separation, whichever occurs first. Late or incorrect timesheets will delay your final paycheck.

NOTE: All CDCN property must be returned at the time of separation.

PAYROLL REPORT REQUESTS

Employees are responsible for keeping all paystubs provided to them by CDCN. Visit myADP.com and create an account after you receive your first paycheck. If payroll information is needed and the stub cannot be found, the employee must make a written request to the Scheduler, Nurse Supervisor or Regional Coordinator.

Emails and/or phone calls are not acceptable.

Processing payroll requests through the Payroll Department may take up to 5 days. Employees may reach out in person at the local office, via email infopayroll@consumerdirectcare.com or send a fax to 406-532-1921. Payroll requested information will not be released to the employee, rather it will be released to the agency or business that requires the information.

TIME OFF REQUESTS

Requests for time off (vacation, etc.) must be made 30 days in advance and need approval from a Nurse Supervisor or Regional Coordinator.

MEAL PERIODS

There is no federal or state law requiring employers to furnish employees with breaks. An unpaid meal period may be provided for employees who work eight (8) hour periods and will be at or near the middle of the work period. Meal periods, which require any attention to work assignments, will be counted as working time.

TARDINESS

Reporting to work on time is required. "On-time" is defined as being properly dressed and prepared to begin work at the start of the scheduled work period. There will be no compensation for tardiness for non-exempt employees. Excessive tardiness is cause for disciplinary action. Excessive tardiness is defined as two (2) times in a calendar month or six (6) times in any part of a twelve (12) month period.

ATTENDANCE / ABSENTEEISM

Regular attendance is required. When it is necessary to be absent, you must notify your supervisor as far in advance as possible, or at least 2 hours prior to a scheduled work period. Irregular attendance, unexcused or unreported absences cause disruption to CDCN and are unacceptable. An unexcused absence is one in which an employee requests, but is not granted, time away from their assigned work schedule or fails to report to work. All caregivers are required to notify CDCN in the event they will be absent.

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One (1) unexcused absence or an unreported absence for a period of 2 consecutive hours may be considered a voluntary resignation.

If a caregiver is off work due to sickness or non-work related injury, they will need a full release from their doctor before they can return to work. In some cases, a PT screening will also be required.

INFORMATIONAL MEETINGS / IN-SERVICES

On certain occasions you may be required to attend meetings to receive information regarding workplace policies, safety procedures, product, and business information or other pertinent information. Each Personal Care Assistant (PCA) or Certified Nursing Assistant (C.N.A) is required to complete eight (8) hours of in-service annually. Scheduled in-services that are held in the office are worth one hour of in-service time, the same in-service as a take home self-study is worth a half hour of in-service time. In-Services for annual training are communicated through email and completed online.

PERSONNEL INFORMATION

CDCN provides SEIU775 with the required information as per the CBA; see section 3.2. For accurate administration of your wages and benefits, and for compliance with federal and state regulations, it is necessary that current and accurate personnel records be maintained. This information is also imperative in the event you must be reached for an emergency or available work. If there are changes, or if you observe or are aware of any errors in your personnel records, please notify your supervisor immediately. Falsification of any personnel information is cause for termination.

TIME REPORTING

CDCN will follow all federal EVV requirements and CGs are required to submit time via EVV. All non-exempt employees are required to complete daily timecards or visit sheets, as provided by CDCN. Timecards must be filled out accurately, completely, signed and turned in to the CDCN office for approval. It is your responsibility to turn in your timecards to your CDCN office. Timecards are due in the office by midnight on the Monday following a work week (Sunday – Saturday). Please pay close attention to the Fraud section under Code of Conduct in this Handbook when completing your timecard.

OVERTIME

For purposes of overtime pay, employees are classified as exempt or non-exempt. Exempt employees are not eligible for overtime pay. Non-exempt employees will be paid overtime per state law. Management must approve all overtime in advance. Excessive logging of overtime, particularly unapproved overtime, will be cause for disciplinary action, up to and including termination.

DEDUCTIONS

Each paycheck will have certain deductions from the gross pay:

1. Those required by law. All required deductions are made on gross pay.
 - a. State and Federal Withholding Taxes
 - b. Social Security Contributions (FICA)
 - c. Court-Mandated Withholdings

- d. Union dues
2. Optional: Those authorized by the employee and approved by management.

PERFORMANCE EVALUATION

Your job performance may be evaluated periodically for the purpose of determining your standard of performance in relation to the job position requirements, workplace rules and regulations. Performance reviews may be ongoing through verbal feedback received from the employee's supervisors and internal and external customers.

EDUCATION

Each employee is responsible for their own occupational qualifications or continuing education. You can contact management for available continuing education opportunities.

DISCIPLINE / TERMINATION

The initial step in any CDCN disciplinary action is counseling with the employee. The counseling will be handled by the Nurse Supervisor, Regional Coordinator and/or the Human Resources Department, depending on the seriousness of the circumstances. Employees will be given an opportunity to improve their behavior or performance. If the unacceptable behavior or poor job performance continues, more serious action may be taken, up to and including termination. CDCN has an Internal Grievance process for employees who disagree with any disciplinary action taken against them.

- a. On the First offense, the caregiver will be coached and counseled on the policy.
- b. On the second offense, the caregiver will receive a written warning.
- c. On the third offense, the caregiver will receive a final written warning.
- d. A fourth offense will result in termination

INTERNAL GRIEVANCE PROCEDURE

If an employee has a problem or complaint that cannot be resolved with their immediate Supervisor, the employee may present a written statement of their complaint, problem, suggestion, or grievance to CDCN's Human Resources Department. The Human Resources Manager will consider the written statement and take such action as deemed appropriate.

If an employee wishes to appeal discharge, layoff, or a change in working conditions, they must present a written statement to the Human Resources Manager within ten (10) days after the employee is informed of the discharge or change in the working condition. The written statement should contain the facts the employee believes should be considered and shall state the resolution the employee believes is appropriate. The Human Resources Manager shall consider and advise the employee or former employee of the final decision regarding the employee's complaint or grievance within ninety (90) days of the employee initiating the process.

DRESS CODE, GROOMING AND HYGIENE - CAREGIVERS

It is the policy of CDCN to set guidelines for appropriate attire for all caregivers in order to present a professional image to clients, families, and physicians.

General Guidelines

- Caregivers are required to wear scrub tops.
- Caregivers must always wear a name badge.
- Caregivers should avoid wearing long necklaces or dangling earrings or bracelets (safety

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issue for staff as well as clients and is especially important when dealing with anyone who could become immediately combative, such as dementia client).

- Fingernails should be kept at appropriate length in order to avoid potential injury to clients during personal care, transfers, etc. (nails are too long if they appear over the tips of fingers when looking at the palm of the hand). Hair should be neatly combed and clean--if working with a combative client or one who has the potential to become so, hair should be worn "up" so it's out of harm's way.
- Footwear must be clean and professional. No open-toed shoes, sandals, flip-flops, or any beach type footwear. Athletic shoes may only be worn if they remain **clean** and in good repair.
- Athletic attire and jeans are discouraged but may be discussed with your immediate supervisor on a case-by-case basis if warranted by job duties or condition of client's home. Halter-tops, tank tops (except when worn with another less revealing top), beachwear and miniskirts are prohibited. Also specifically prohibited are outfits that reveal bare midriffs, cleavage, underwear, or the cleft of the buttocks.
- Visible piercings are allowed as long as they will not harm the member by accidental scratching or catching on skin or clothing.

Any employee, if circumstances warrant, may be sent home (without pay) to correct unacceptable appearance.

EMPLOYEE BENEFITS

Various employee benefits may be available to you, including vacation, holidays, and optional insurance programs. Eligibility is dependent upon job classification and plan requirements.

INSURANCE

Unemployment and Workers' Compensation Insurance are provided by CDCN and cover all employees. If you are injured on the job you MUST report such injury and/or accident to your supervisor immediately. Failure to immediately report an injury could cause a claim to be delayed or denied. All injuries whether work-related or not, MUST be reported to CDCN's Risk Manager. See Employee Injury Reporting.

HEALTH INSURANCE FOR DIRECT HEALTHCARE WORKERS

Caregivers working 30 hours per week, or more are eligible for health insurance on the first of the month following/coinciding with a 30-day waiting period. Notice of eligibility and enrollment information will be mailed or emailed to caregivers meeting the eligibility requirements.

If you participate in the Consumer Direct Health Plan, you are entitled to receive certain information about our benefits as required by the Employee Retirement Income Security Act of 1974 ("ERISA"). Consumer Direct intends to provide this information to you via electronic delivery. The information sent electronically will include, but may not be limited to:

- Summary Plans
- Summaries of Material Modification
- Summaries of Benefits and Coverage
- Summary Annual Reports

- Annual Notices

These documents will be furnished to you as an attachment to an email sent to the email address you specify to us. The attachment will be in PDF format. To access the email and attached document, you must have: (1) a computer or smartphone with internet access; (2) a program installed on that computer or smartphone allowing you to send and receive emails (such as Internet Explorer or Google Chrome); and (3) Adobe Acrobat Reader installed on your computer or smartphone allowing you to open and read the document. Please keep a copy of the email and any attached documents for future use. You must be able to either (1) print a copy on a printer attached or linked to the computer or smartphone; or (2) save a copy in electronic form to your computers or smartphone's hard drive, or on an external drive (e.g., on a flash drive).

NOTE: If any of these requirements or delivery methods change in a way that creates a material risk that you may no longer be able to access and retain electronically transmitted documents, we will furnish you with notice and a request that you provide a new consent.

You have a right to receive a paper version of any electronically transmitted document at no charge. Please contact Consumer Direct Human Resources at InfoBenefits@consumerdirectcare.com or 844.360.4747 to obtain a paper copy.

To update your email address, you must notify Human Resources in writing at Consumer Direct, 100 Consumer Direct Way, Missoula, MT 59808 or via email at InfoBenefits@consumerdirectcare.com with "Change in Email Address for Electronic Disclosure" in the subject matter line.

HOLIDAY BENEFIT FOR CASUAL EMPLOYEE

Upon hire with CDCN, casual employees will receive holiday pay for **regular hours worked** on the following holidays: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, and Christmas Day. Holiday pay will be paid at a rate of time-and-one-half of regular wages.

FAMILY AND MEDICAL LEAVE ACT OF 1993

The Family and Medical Leave Act ("FMLA") became effective August 5, 1993. It applies to employers with 50 or more employees within a 75-mile radius. The policy of CDCN is to balance the demands of the workplace with the needs of families of employees by allowing an eligible employee to take reasonable leave for legitimate medical reasons, as stated in the FMLA regulations.

Eligibility Requirements:

- The employee must have been employed by CDCN for at least twelve (12) months.
- The employee must have worked at least 1250 hours with CDCN during the previous 12-month period.

Leave Requirements: FMLA provides that an eligible employee (see above) shall be entitled to a total of twelve (12) weeks of leave during any 12-month period for any of the following reasons:

- To care for the employee's child after birth, or placement for adoption or foster care;
- To care for the employee's spouse, son or daughter, or parent, who has a serious health condition; OR

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- For a serious health condition that makes the employee unable to perform their job. A medical release from the employee's physician is required to return to work.

The law provides for a 30-day advance notice from the employee (when possible) to the employer when applying for FMLA leave. The law also requires specific forms be completed by both the employee and the employer. A poster explaining your rights under this law is posted on the employee bulletin board in each CDCN office. Please contact your supervisor for specific details regarding eligibility, and/or to get a copy of the form.

MILITARY LEAVE

The employer will comply with the Uniformed Services Employment and Reemployment Rights Act (USERRA) and applicable laws. The Employer will offer details about USERRA to caregivers, the rights and benefits available, and the procedure to utilize these benefits.

MATERNITY LEAVE

Maternity leave shall be governed by State law.

LEAVES OF ABSENCE

After completion of one year of employment, unpaid leaves of absence, not to exceed ten (10) working days, may be granted for bona fide reasons, or for other reasons mutually agreed upon with CDCN. All leave is to be requested in writing to CDCN, stating the start and end dates of the leave of absence.

Upon expiration of the leave, or upon notification by the employee to CDCN of intent to return, the employee will be returned to the next available job opening in their classification. If an employee on leave does not report upon the expiration of the leave, or any extension authorized by CDCN, the employee shall be considered as having voluntarily resigned.

BEREAVEMENT

Agency Based Traditional Employees are eligible for bereavement paid time off in the event of a death in their family, according to the following schedule:

- Immediate family member: up to three (3) business days of unpaid bereavement, up to and including the day of the funeral. "Immediate family member" is defined as the CGs children, adoptive children, stepchildren or other living within the household, parents, step parents or adoptive parents, parents in law, spouse or partner, grandparents and siblings or step siblings.
- One (1) business day unpaid, up to and including the day of the funeral. Close relatives and long-term clients; includes CG aunt, uncle, cousin, niece, nephew, and sibling in law, any client that the CG has served for more than 12 months on a regular basis.

FUNERAL LEAVE / EMERGENCY LEAVE

This is decided on a case-by-case basis. Please submit your request to your immediate supervisor. Every attempt will be made to accommodate employees following the death of an immediate family member.

JURY DUTY / WITNESS

CDCN will follow all local, state, and federal laws to allow employees to serve on juries. If you are excused from duty early, or are not required to be present in court, you are expected to return to work. You shall notify your supervisor as soon as possible after you receive notice of

jury duty. If your absence would result in a hardship on CDCN, we may petition the court to excuse you from jury duty.

ILLNESS / DISEASE

There will be no adverse employment action against an employee based solely on their medical condition. Employees with infectious diseases may be reassigned if the safety of co-workers or clients is in question. Any employee's refusal to work with an afflicted co-worker may be cause for disciplinary action. A violation of any client or employee confidential health files/medical conditions will be cause for disciplinary action.

TIME OFF TO VOTE

If an Agency-Based Traditional Caregiver is unable to vote in an election during non-working hours, with advance notice (at least fourteen (14) calendar days prior to the Election Day) given to the caregiver's supervisor, caregivers may arrange with their supervisor to utilize one hour during their scheduled shift to vote. Unless otherwise required by applicable law, time off to vote will be unpaid.

SAFETY & INJURY REPORTING

CDCN is committed to safety in all areas of the Company and its goal is to comply with the Occupational Safety & Health Act of 1970. This Act requires that employers provide a safe and healthful working environment and that employees comply with occupational safety and health standards and all rules, regulations and orders contained within the Act which are applicable to their own actions and conduct.

We believe that safety must function as an integral part of, and in no manner separated from, the operation of the Company. In recognition of this and in the interest of prudent management practices, CDCN's goal is to:

- Maintain a safe and healthful working environment.
- Consistently adhere to proper operating practices and procedures which are designed to prevent injury, illness, and loss of assets.
- Comply with the requirements of federal, state, and local safety and health codes to ensure the well-being and safety of all employees.

In order to achieve these goals, employees shall receive training on the use of equipment, proper and safe operating procedures, and site/task-specific job functions. Periodic safety training sessions will be conducted, as needed, to maintain employee awareness.

All employees are responsible for exercising maximum care, good judgment and shall comply with established safety and accident prevention procedures. Unsafe conditions, equipment or practices must be reported to the supervisor immediately. Each employee is expected to abide by all safety rules and procedures and shall wear any and all personal protective equipment required and provided by the employer, when appropriate.

Our safety rules have been written with you in mind. Please follow the rules and help CDCN ensure a safe working environment.

HAZARDOUS MATERIALS

The hazards of all chemical materials present in the workplace shall be communicated to all potentially exposed employees including CDCN office staff and caregivers (per a review of the client premises during initial intake and recertification visits).

THREATS AND VIOLENCE IN THE WORK ENVIRONMENT

Threats, threatening behavior, intimidation, and acts of violence are prohibited. Such behavior directed toward clients, employees, vendors, visitors, guests, or other individuals will not be tolerated. Such actions may result in disciplinary action, up to and including termination.

WEAPONS

Possession of firearms, handguns or any potentially dangerous items or materials while performing job duties or while on CDCN's premises, is prohibited. Violation of this policy may lead to disciplinary action up to and including termination.

EMERGENCY PROCEDURES

Employees should always familiarize themselves with the emergency exit/evacuation plans and procedures for the local CDCN office and for each client's residence in which they work.

CLIENT ACCIDENT OR INJURY – INCIDENT REPORTING

If the Client is injured or suffers an accident while the CDCN employee is present, the employee **SHALL REPORT THE ACCIDENT BY CONTACTING CDCN MANAGEMENT IMMEDIATELY, and then complete an Incident Report.** If warranted, the employee should request emergency services, i.e., an ambulance. **CDCN employees should not use their vehicles to transport clients needing emergency services.**

EMPLOYEE INJURY REPORTING

Employees injured on the job **MUST** report their injuries immediately. CDCN is very concerned about any workplace injury that may occur, and has an active Early Return to Work program for injured workers. If an employee is injured at work or develops a workplace related illness, they should follow these steps:

1. If needed, get medical help.

- If the injury is serious and life-threatening: Someone should call 911 or take the injured worker to the nearest emergency room.
- If the injury is not life-threatening but requires medical treatment the injured worker should go to an urgent care clinic or doctor's office; if neither is available, utilize the emergency room.

2. Call the Injury Hotline to report the injury/illness immediately upon occurrence, whether or not the injury seems serious at the time.

- CDCN has set up a toll free phone line to receive all injury reports.
- CDCN's Injury Hotline phone number is: **1-877-532-8542**, and is available 24 hours a day, 7 days a week to report an injury.
- Contact Nurse Supervisor if there is an injury

ALL injuries, whether work-related or not, MUST be reported to the Risk Management Department by calling the Injury Hotline.

NON-WORK-RELATED INJURIES

All employee injuries or serious illnesses must be reported to Risk Management, whether job-related or not. This policy ensures that injured or ill employees will not be expected to resume regular duties unless and until their doctor releases them to regular duty.

WORKERS' COMPENSATION

All CDCN employees are covered by workers' compensation insurance. This means that if an employee sustains a work-related injury or illness, CDCN's workers' compensation insurance carrier will provide oversight and appropriate compensation. Compensation can be in the form of paid medical expenses and/or compensation for work missed due to the work-related injury or illness.

- The injured employee must report the injury or illness immediately to the Risk Manager to ensure coverage under State law.
- The Risk Manager will complete a Montana First Report of Injury or Illness form and send it to the work comp insurance carrier. This initiates the work comp "claim" process.
- Work comp claims are then assigned to work comp adjusters who monitor the claims, provide on-going information to the injured employee, and work closely with the medical providers to ensure the injured employee is receiving appropriate treatment.

EARLY RETURN TO WORK PROGRAM

The Employer will comply with all federal and state laws regarding workplace injuries.

GENERAL POLICIES AND PROCEDURES

NON-SOLICITATION

All CDCN clients must sign a contract in order to receive services through CDCN. The contract provides that during the term of service with CDCN, and for a period of 6 months following termination of services, the client cannot hire or otherwise utilize services of any person previously provided by CDCN, except through a contract with CDCN. If the client violates these provisions, they will be subject to financial penalties.

PRIVATE PAY POSITIONS

It is the policy of CDCN that an employee cannot care for a CDCN client, while caring for the same client under a separate Private Pay employment situation.

FINANCIAL RESPONSIBILITY

You may be held financially responsible for any breakage, loss, or damage you may cause to CDCN's or client's property or equipment if the same shall have been caused willfully through negligence or disregard for the property of CDCN or client.

EQUIPMENT FAILURE / DAMAGE

Damage or needed repair to CDCN or client equipment must be reported immediately to your supervisor. Violation of this requirement is cause for disciplinary action up to and including termination.

TELEPHONE / EQUIPMENT USAGE

The telephone and other CDCN equipment are furnished for the operation of the business. Telephone use for personal calls shall be kept to a minimum. No personal, long-distance calls are to be made and charged to CDCN, or CDCN clients. No personal use of other CDCN equipment is permitted without prior approval from management.

COMPUTER, INTERNET, AND EMAIL USAGE

Computers, computer files, Internet access, email and software furnished for employee use are the property of CDCN and intended for business use only. Employees are not to use passwords, access files, or retrieve any stored communication without authorization. To ensure compliance with this policy, computer and email usage may be monitored.

CDCN strives to maintain a workplace free of harassment and therefore prohibits the use of computers and email in ways that are disruptive, offensive to others or harmful to morale. The display or transmission of sexually explicit images, messages and cartoons is not permitted. Other such misuse includes but is not limited to, ethnic slurs, racial comments, off-color jokes, or anything that may be construed as harassment or disrespect for others.

The Internet and email may not be used for solicitation of commercial ventures, religious or political causes or other non-company business.

CDCN purchases and licenses the use of various computer software for business purposes and does not own copyrights to the software or related documentation. Employees may only use the software on approved area networks or on multiple machines according to the license agreement. Illegal duplication of software and related documentation is prohibited.

Employees are required to notify their immediate supervisor or any member of management upon learning of violations of this policy.

VEHICLE USE

An employee who operates a motor vehicle (either privately-owned or company-provided) while on CDCN business, must comply with CDCN's Safe Driving Policy. If a personal vehicle is used for company business, proof of insurance with appropriate statutory limits shall be required. **No smoking is allowed in company-owned or leased vehicles.**

Any employee who operates a vehicle on behalf of CDCN shall maintain an unrestricted, appropriate driver's license. By accepting employment with CDCN, you authorize the Motor Vehicle Division of Montana to furnish CDCN, upon request, a status report of your driving record. Failure to maintain an unrestricted, appropriate driver's license or vehicle insurability, if driving a private vehicle, may be cause for disciplinary action, up to and including termination. Proof of insurance for any private vehicles may be requested. Company-owned or leased vehicles shall be used for CDCN business purposes only. CDCN's insurance carrier requires that employees not permit members of their family or others to travel in company-owned or leased vehicles. CDCN requires that when employees are transporting clients in their own vehicle, they keep their vehicle clean and respectful to maintain a professional image.

Accidents and/or traffic violations while on CDCN business must be reported immediately to CDCN's Risk Manager. Failure to report accidents and/or traffic violations is cause for disciplinary action, up to and including termination. Fines and/or penalties resulting from accidents or traffic violations due to the employee's negligence are solely the employee's responsibility and will not be paid by CDCN.

CLIENT CONFIDENTIALITY

You are not to discuss or otherwise divulge any information concerning the business affairs of any client or CDCN. Any action or expression by an employee considered objectionable by clients, prospective clients or your supervisor may be cause for disciplinary action up to and including termination.

CLIENT RELATIONS

To preserve and foster the public's trust and confidence in CDCN, it is imperative that all employees act with complete honesty and fairness. You are expected to be knowledgeable about your job and applicable laws and regulations pertaining to your job. Whenever you have a question relating to applicable laws or regulations, you should seek out appropriate advice before acting. In dealing with the public, you are expected to exercise good judgment and common sense. Commitments to others should be made only if such commitments realistically can be met. In this regard, the products, and services of CDCN should be presented accurately and fairly.

If you should become aware of actual or potential problems in any area of the business of CDCN, you are expected to inform your supervisor immediately. If you are aware of improvements to policies, procedures, products and/or possible business opportunities that will contribute to customer satisfaction and enhance CDCN, you are urged to bring those improvements to the attention of your supervisor.

COMPANY CONFIDENTIALITY

You may have access to records and/or other information about CDCN and/or other workers. This includes proprietary information, operational procedures, trade secrets and intellectual property. You are not to discuss this information with anyone else without proper authority.

Anything CDCN does to design, produce or market their products is treated as proprietary information, sometimes called trade secrets. Any information that would damage the business of CDCN if it became public knowledge or was disclosed to a competitor is considered a trade secret. This includes, but is not limited to, information relating to operations, service, sales, financial matters, clients, or employees.

You are not to discuss client or company information with any person from outside CDCN or with other employees in any public place where it is possible to be overheard. Should you leave CDCN for any reason, the obligation not to disclose confidential information continues indefinitely.

THEFT OF DRUGS OR CLIENT PROPERTY

A Police Report is filed whenever medications or personal property are reported missing from a client's residence. If a CDCN employee is formally charged or implicated in any theft of client or CDCN property, they will be subject to disciplinary action, up to and including termination.

ALCOHOL / DRUGS

Personal use, sale, purchase, transfer, or possession of alcohol or any illegal drug, or the presence of such, in any detectable amount, while performing job duties while on CDCN property, in a client's home, or in a company-owned or leased vehicle is prohibited. Violation of this policy is cause for disciplinary action, up to and including termination. CDCN requires that each employee be fit for duty as described in each job description.

A copy of CDCN's Fitness for Duty, Drug Free Workplace Policy is in the Appendix.

STANDARDS OF CONDUCT

POLICY

Employees must follow standards of conduct. Violations of these commonsense rules of conduct will subject the offender to appropriate corrective action. When misconduct occurs, managers will take such corrective action as deemed appropriate for the committed offense.

PROTOCOLS

1. Employees will arrive on time.
2. Employees will not use their personal cell phones during client visits except to clock in/out of EVV and emergency situations
3. Employees will not give out their personal phone numbers to clients.
4. Employees will not use the client's phone at any time, except for emergency and client-related needs.
5. Employees will not arrive at the client's home with other people or pets.
6. Employees will not borrow any client belongings or money.
7. Employees will not leave a client's home before the scheduled time without being authorized by the Nurse Supervisor.
8. Employees will report any concerns or problems regarding the delivery of services or tasks to the Nurse Supervisor, as soon as possible.
9. Employees will not change their scheduled hours of service without notifying the Nurse Supervisor.
10. Employees will provide the client with a receipt and the appropriate change when asked to shop without the client being present.
11. Employees will not provide unauthorized services or time.
12. Employees will have the client or representative initial the time sheet daily, where indicated, and sign and date the timesheet on the last day of service for the week.
13. Employees will turn in their timesheets on time as required by CDCN policy.
14. The following acts are specifically prohibited:
 - Working for or with a client who has terminated services with CDCN within six months of leaving the Company. If this happens, the employee will lose their position with CDCN permanently.
 - Neglect of duty, loitering or leaving place of work during working hours without proper authorization.
 - Smoking or use of smokeless tobacco on CDCN's premises, in company-owned or leased vehicles, in the client's home, or while on company business.
 - Selling to or soliciting by employees any goods or services, subscriptions, memberships, or the like, enlisting participation in special activities, or collecting contributions during working time, unless permitted by CDCN Management.
 - Removing CDCN property, or any property other than one's own, from the premises without proper authorization.
 - Sleeping on the job during working hours.

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- Deliberately parking in the visitors' or handicapped parking area, or parking in a no-parking area without authorization.
- Engaging in horseplay, scuffling, or creating disturbing or unnecessary noise during business hours or when at a client's residence.
- Fighting or provoking or instigating a fight on CDCN premises at any time.
- Reporting for work or being on the premises during scheduled working hours unfit for duty due to the influence of alcoholic beverages or illegal drugs or possessing or promoting the use of alcoholic beverages or illegal drugs.
- Violating safety rules or safety practices or causing injury to another employee by violating a safety rule.
- Abusive, immoral, or obscene language or indecent conduct toward any employee or supervisor at any time.
- Any unauthorized disclosure of confidential information in violation of HIPAA standard, or divulging confidential information regarding a fellow employee or client to other CDCN clients, employees, friends or family.
- Spreading false or malicious rumors concerning CDCN products or employees.
- Posting or removing anything on or from bulletin boards or CDCN property at any time, or tampering with any signs or notices.
- Deliberately curtailing or hampering operations by willfully or negligently misusing or destroying or damaging any CDCN property.
- Possession of firearms, explosives, or other deadly weapons on CDCN premises.

Violations of the above-listed standards will result in immediate disciplinary action, up to and including termination.

CONFLICTS OF INTEREST

Relationships with Suppliers, Customers and Competitors

If you hold any position of employment, or own or acquire, directly or indirectly, a beneficial interest in any concern you have reason to believe may supply goods or services to, or purchases from, or competes with CDCN, you are required to disclose the full details concerning such interest or relationship. In such circumstances, a conflict may arise if you are in a position to influence decisions with respect to any of CDCN's transactions and if your interest or relationship is such that it might bring into question your continued ability to make independent and impartial judgments that are in the best interests of CDCN.

Gifts or Favors

Acceptance of money, gifts or favors from any individual or concern which you have reason to believe may transact business, or may seek to transact business, with CDCN will constitute a violation of this policy, unless such gift or favor involves no more than an ordinary social amenity. All offers of gifts or favors of more than nominal value should be immediately reported to your supervisor.

Proprietary and Other Confidential Information

Unless duly authorized, you may not provide information to any outside organization or individual about bids, specifications, financial data or transactions, product features, process details or other matters (including computer-generated information of any nature), where such disclosure involves confidential or proprietary information or might otherwise be contrary to the best interests of CDCN.

Use of Company Assets and Resources

You may not engage in activities during work time, use, or cause to be used, without prior written approval from Management, any of CDCN's facilities, equipment, (including any computer resources), materials or supplies for your personal convenience or profit; nor may you take advantage in this manner of outside individuals or organizations doing business, or seeking business, with CDCN. CDCN resources also may not be utilized for non-profit organizations such as trade or professional associations without appropriate Management approval.

PUBLIC CONDUCT

Employees should always be mindful of the position of CDCN in the community. Good reputation and success require continuing adherence to high standards.

Language

All employees are required to refrain from using slang, profanity, and/or offensive remarks including but not limited to age, sex, race, religion, marital status, disability, and national origin.

Attire

Each employee reflects the image of CDCN and is required to comply with CDCN's dress code. Disciplinary action, up to and including termination may result if employees refuse to follow this requirement.

Hygiene

All employees must maintain personal grooming habits that reflect a presentable image for CDCN.

Criminal/Civil/Professional Investigation

Due to the nature of CDCN's business, any employee who is subject to any investigation of a civil, criminal, or professional nature, including a DUI, may be reassigned. Other options may be utilized to ensure the safety of clients and the employee, and to protect the interests of CDCN during the investigation period. Depending on the nature of a conviction, termination may result.

Cultural Awareness

CDCN employees are expected to always show respect for other cultural and ethnic groups and to provide quality care and services to everyone, equally, without regard to cultural or ethnic differences.

FRAUD

Fraud is intentional deception or misrepresentation that could result in any unauthorized benefit. Fraud is illegal and carries heavy penalties including misdemeanor or felony convictions, large fines, jail sentences and loss of employment. Federal and State governmental agencies are responsible for identifying, investigating, and referring cases of suspected fraud to law enforcement officials. Because Medicaid reimburse CDCN for services we provide to many of our clients, we are a mandatory reporter of any suspected Medicaid fraud.

Therefore, any employee, client, guardian, or legal representative who participates in any of the following activities will be reported to the appropriate government authority and **may result in disciplinary action up to and including termination, as well as criminal prosecution.**

Fraudulent activity includes, but is not limited to:

- Reporting more time than actually worked; Padding time sheets – showing up late or leaving early and not reporting the actual time worked – or taking a break and not reporting the break as unpaid time by signing out and back in again.
- Reporting completion of tasks and procedures not performed.
- Accepting pay for time not worked.
- Altering other people's time sheets or paperwork.
- Forging other employee or client signatures.
- Knowingly billing false time or tasks.
- Failure to meet federal or state licensure or certification requirements.
- Presenting, or causing to be presented for payment, any false or fraudulent claim for services or supplies.
- Submitting, or causing to be submitted, false information for the purpose of obtaining greater compensation than that to which the person is legally entitled.
- Failing to provide and maintain quality services to Medicare or Medicaid clients within accepted medical community standards.
- Engaging in a course of conduct or performing an act considered improper or abusive of the Medicare or Medicaid programs, or continuing that conduct following notification that it should cease.
- Over-using the Medicare or Medicaid program by inducing or otherwise causing a client to receive services or supplies not required or requested by the client.
- Rebating or accepting a fee or portion of a fee or charge for a Medicare or Medicaid client referral.
- Violating any laws, regulation or code of ethics governing the conduct of occupations, professions, or regulated industries.

You must immediately report suspected Medicaid fraud to CDCN or the appropriate authority. Reporting contact information is available on our website under the Resources/Fraud Prevention tab.

Summaries of the **Federal False Claims Act** and applicable Montana statutes are included in the Appendix of this Handbook. Comprehensive training, using "An Overview of the False Claims Act and Federal Health Care Programs" training material, is conducted with all managers and staff.

CORPORATE COMPLIANCE

It is policy to obey federal, state, and local laws pertaining to the services provided to our clients. All field and office employees, department managers, and their designees are directly responsible for ensuring that the provision of services and routine operations are compliant with all applicable laws. If you suspect fraudulent or illegal activity is occurring either in an isolated incident or on an on-going basis, you have a duty and responsibility to report the suspect activity to the Corporate Compliance Officer, who is the President. In the President's absence, the Risk Manager is an alternate contact. Examples of non-compliance activities include, but are not limited to, the areas of fraud listed above.

A copy of the Corporate Compliance Policy is in the Appendix.

CAREGIVER HANDBOOK

Revised January, 2025

MONTANA

APPENDIX



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APPENDIX

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COMPLIANCE POLICY STATEMENT

The Company (“Company”) is committed to maintaining an organizational and accountability structure that promotes integrity and ethical behavior, assures compliance with all governmental laws, rules, and regulations, and supports the Company’s ethical standards, standards of conduct and zero tolerance for fraud and abuse.

OBJECTIVES

The Company believes a compliance program is beneficial to everyone. It enhances employee morale, productivity, and effectiveness. It also improves the quality of care. The Company’s goal is to integrate compliance into daily operations in order to create a better workplace and to ensure quality care.

RESPONSIBILITY

The Company’s Corporate Compliance Officer, Kelly CZarnik, may be reached at :infocompliance@consumerdirectcare.com , is responsible for overseeing the implementation of the Corporate Compliance program and monitoring adherence to its standards. The Risk Manager assists the Corporate Compliance Officer.

Each Program Manager, State Director or Operations Director is responsible for the compliance efforts within their areas of responsibility. All field and office employees, department managers, officers and their designees are directly responsible for ensuring that the Company, in the provision of services and in routine operations, is compliant with Federal and State law, and Federal, State, and private payer health care program requirements. Each employee is responsible for reporting any perceived or potential compliance infractions.

Due diligence to prevent and detect violations of the law is everyone’s responsibility.

SCOPE

The Company’s Compliance program encompasses all aspects of the Company’s operations and involves all management, staff, and employees of the Company.

INTERNAL CONTROLS

Prevention

Pre-screening of potential employees includes OIG and criminal background checks. The Company may prohibit the employment of individuals who have been recently convicted of a felony, a criminal offense related to health care or who are listed as debarred, excluded or otherwise ineligible for participation in Federal health care programs.

Standards of Conduct

All management, staff and employees of the Company are expected to be familiar with and abide by the standards set forth in the Company's internal policies as well as all governmental laws and regulations specific to their locations and services. The following issues are of particular concern.

Discrimination or **Harassment** of any kind is not tolerated by the Company, and should be reported immediately. The Human Resources Department investigates all reports of discrimination or harassment and takes whatever action is needed to resolve the situation.

Safety must function as an integral part of the operations of the Company. The Company must maintain a safe and healthful working environment and must comply with the requirements of Federal, State, and local safety and health codes to insure the well-being and safety of all employees and consumers. Employees must adhere to the proper operating practices and procedures designed to prevent injury, illness, and loss of assets.

Fiscal Responsibility involves verifying eligibility of consumers, maintaining accurate records of services provided and billed for, and reconciling payments. The Company is diligent in its efforts to comply with all mandated accounting rules and regulations to ensure that current federal and state health care requirements are being met.

Fraud is defined as an intentional deception or misrepresentation that could result in any unauthorized benefit. Examples of fraud are listed in the Employee Handbook. Fraud is illegal and all discovered instances of fraud are reported to the appropriate authorities. The Company takes the commission of a fraud very seriously, and considers it grounds for immediate termination of employment. **All suspected fraudulent activity must be reported immediately to the department manager or compliance hotline.** In the event of no action, inappropriate action, or lack of timely follow-up regarding a report, the Compliance Officer should be contacted.

A summary of the **Federal False Claims Act** is attached to this policy as Addendum 1. Addendum 2 is a brief discussion of **State Law** governing false claims and Medicaid fraud and is included in Employee Handbooks. Comprehensive training is conducted with all managers and staff regarding the provisions of the Federal False Claims Act.

Non-Retaliation

The Company believes in an open-door policy that enables compliance officers, managers, and employees to comfortably discuss ethical matters, to ask questions and get answers while preserving the employee's rights to anonymity and confidentiality. The Company does not engage in or tolerate any retaliation or threats of retaliation against anyone who reports, in good faith, a violation or suspected violation of the law, Company policy, standards of conduct or other improprieties.

Reporting & Response

Reports of suspected offenses can always be discussed with an employee's immediate supervisor, department manager, Regional Director, Human Resources Director, or Risk Manager. However, if an employee feels more comfortable reporting a suspected fraud or abuse outside of the "chain of command," they can contact the Compliance Officer directly, at any time. Employees can make reports anonymously via the Fraud hotline if they so desire.

No report of a suspected violation is ignored. Each allegation is fully investigated and documented. The investigation may be tailored to the level of the allegation, and if the allegation is substantiated, corrective action is taken. All reports and any corrective actions are documented. If appropriate, corrective actions are communicated to all employees.

If a violation calls for self-reporting to a government agency, the Company immediately does so, and may refer the matter to legal counsel, when appropriate.

Enforcement

Disciplinary action for any employee who has failed to comply with the Company's standards of conduct, policies and procedures, Federal health care program requirements, or Federal and State laws, or who have otherwise engaged in wrongdoing, is decided on a case-by-case basis, and takes into account both mitigating and aggravating circumstances. Corrective action is appropriate to the seriousness of the breach, and may include actions up to termination of employment.

Intentional or reckless noncompliance results in significant sanctions ranging from oral warnings to suspension, termination, or financial penalties. In addition, corrective action may be appropriate where a responsible employee's failure to detect a violation is attributable to his or her negligence or reckless conduct.

The Compliance Officer, working with the appropriate manager or Regional Director, will determine the level of discipline in each case. If there is reason to believe that the misconduct violates criminal, civil, or administrative law, then the Company will promptly report the existence of misconduct to the appropriate Federal and State authorities.

Record-Keeping

All reports of non-compliance, follow-up and disciplinary action are documented. The Company maintains adequate procedures and forms to address recurring issues, so that all incidents are recorded fully and consistently.

MONITORING

The Company believes an ongoing evaluation process is critical to a successful compliance program. The Company's evaluation process produces compliance reports that are maintained by the Compliance Officer. These include reports of suspected noncompliance and any subsequent investigation. The records of the investigation include documentation of the alleged violation, a description of the investigative process, copies of notes from interviews, the

result of the investigation, including disciplinary action taken, and any corrective action that may have been implemented.

TRAINING

All new employees receive copies of the Employee Handbook or similar communication. The Handbook includes the Company's standards of conduct and a statement on Corporate Compliance. Modifications and updates are circulated in writing to all employees and discussed in department meetings.

Compliance awareness training is provided to employees at orientation and quarterly Compliance Notices are sent to employees by the Compliance Officer via newsletter.

Approved by: Ben Bledsoe Title: President/CEO Date: 2/16/2015
signature on file

ADDENDUM 1

FEDERAL FRAUD AND ABUSE POLICY
United States Code Title 31 § 3729-3733**False Claims Act**

I. DEFINITIONS

- A. Claim. "Claim" includes any request or demand for money, property, or services made to any employee, officer, or agent of the Government (including, without limitation, Medicare Part B Carriers and Medicare Part A Fiscal Intermediaries), or to any contractor, grantee, or other recipient.
- B. Knowing and Knowingly. "Knowing" and "knowingly" mean that a person, with respect to information, does any of the following:
 - (1) Has actual knowledge of the information.
 - (2) Acts in deliberate ignorance of the truth or falsity of the information.
 - (3) Acts in reckless disregard of the truth or falsity of the information.Proof of specific intent to defraud is not required.
- C. Person. "Person" means any employee, volunteer, manager, contractor, or agent of Employer.
- D. Employer. "Employer" means Company.

II. ACTS SUBJECTING PERSON TO DAMAGES, COSTS AND CIVIL PENALTIES; EXCEPTIONS

- A. Liability under the Act. According to the Act, any person who commits any of the following acts shall be liable to the Government (the "Government") for two times the amount of damages that the Government sustains because of the act of that person. A person who commits any of the following acts shall also be liable to the Government for the costs of a civil action brought to recover any of those penalties or damages, and shall be liable to the Government for a civil action brought to recover any such penalty or damages:
 - (1) Knowingly presents or causes to be presented to any employee, officer, or agent of the Governments, or to any contractor, grantee, or other recipient of Government funds, a false or fraudulent claim for payment or approval.
 - (2) Knowingly makes, uses, or causes to be made or used, a false record or statement to get a false or fraudulent claim paid or approved.
 - (3) Conspires to defraud the Government by getting a false claim allowed or paid, or conspires to defraud the Government by knowingly making, using, or causing to be made or used, a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the Government.
 - (4) Has possession, custody, or control of public property or money used or to be used by the Government and knowingly delivers or causes to be delivered less property than the amount for which the person receives a certificate or receipt.
 - (5) Is authorized to make or deliver a document certifying receipt of property used or to be used by the Government and knowingly makes or delivers a receipt that falsely represents the property used or to be used.

- (6) Knowingly buys, or receives as a pledge of an obligation or debt, public property from any person who lawfully may not sell or pledge the property.
 - (7) Knowingly makes, uses, or causes to be made or used, a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the Government.
 - (8) Is a beneficiary of an inadvertent submission of a false claim to any employee, officer, or agent of the Government, or to any contractor, grantee, or other recipient of Government funds, subsequently discovers the falsity of the claim, and fails to disclose the false claim to the Government within a reasonable time after discovery of the false claim.
- B. Damages Limitation. Notwithstanding subsection (A) above, a court may decide that no civil penalty shall be assessed, if such court finds all of the following:
- (1) The person committing the violation furnished officials of the Government who are responsible for investigating false claims violations with all information known to that person about the violation within 30 days after the date on which the person first obtained the information.
 - (2) The person fully cooperated with any investigation by the Government.
 - (3) At the time the person furnished the Government with information about the violation, no criminal prosecution, civil action, or administrative action had commenced with respect to the violation, and the person did not have actual knowledge of the existence of an investigation into the violation.
- III. PROSECUTING AUTHORITY AND CIVIL ACTIONS BY INDIVIDUALS AS QUI TAM PLAINTIFF AND AS PRIVATE CITIZENS
- A. Responsibilities of the Attorney General. According to the Act, the Attorney General shall investigate a violation as described under section II above. If the Attorney General finds that a person has violated or is violating section II, the Attorney General may bring a civil action against that person as set forth below.
- B. Actions by private persons. A person may bring a civil action for a violation of the Act for the person and for the Government in the name of the Government. The person bringing the action shall be referred to as the qui tam plaintiff.
- C. Rights of the parties to qui tam (whistleblower) actions.
- (1) If the Government proceeds with the action, it shall have the primary responsibility for prosecuting the action, and shall not be bound by an act of the person bringing the action. Such person shall have the right to continue as a party to the action, subject to the following limitations:
 - a. The Government may seek to dismiss the action for good cause.
 - b. The Government may settle the action with the defendant.
 - c. Upon a showing by the Government that unrestricted participation during the course of the litigation by the person initiating the action would interfere with or unduly delay the Government's prosecution of the case, or would be repetitious, irrelevant, or for purposes of harassment, the court may, in its discretion, impose limitations on the person's participation, such as:
 - (i) limiting the number of witnesses the person may call;
 - (ii) limiting the length of the testimony of such witnesses;

- (iii) limiting the person's cross-examination of witnesses; or
 - (iv) otherwise limiting the participation by the person in the litigation.
 - d. Upon a showing by the defendant that unrestricted participation during the course of the litigation by the person initiating the action would be for purposes of harassment or would cause the defendant undue burden or unnecessary expense, the court may limit the participation by the person in the litigation.
 - (2) If the Government elects not to proceed with the action, the person who initiated the action shall have the right to conduct the action.
 - (3) The Government may elect to pursue its claim through any alternate remedy available to the Government, including any administrative proceeding to determine a civil money penalty, such as The Program Fraud Civil Remedies Act (the PFCR Act"). The PFCR Act permits Federal agencies to use administrative procedures to obtain penalties and assessments from persons who submit false, fictitious, or fraudulent claims, similar to the claims set forth in section II above. If an alternate remedy is pursued in another proceeding, the person initiating the action shall have the same rights in such proceeding as such person would have had if the action had continued under this section.
- D. Award to qui tam plaintiff.
 - (1) If the Government proceeds with an action brought by a person under subsection (b), such person shall, subject to certain limitations, according to the Act receive at least 15 percent but not more than 25 percent of the proceeds of the action or settlement of the claim, depending upon the extent to which the person and/or his counsel substantially contributed to the prosecution of the action.
 - (2) If the Government does not proceed with an action in accordance with this section, the person bringing the action or settling the claim shall receive an amount that the court decides is reasonable for collecting the civil penalty and damages. The amount shall be not less than 25 percent and not more than 30 percent of the proceeds of the action or settlement. Such person shall also receive an amount for reasonable expenses, plus reasonable attorneys' fees, and costs.
 - (3) If the Government does not proceed with the action and the person bringing the action conducts the action, the court may award to the defendant its reasonable attorneys' fees and expenses if the defendant prevails in the action and the court finds that the claim of the person bringing the action was clearly frivolous, clearly vexatious, or brought primarily for purposes of harassment.
- E. Government not liable for certain expenses. The Government is not liable for expenses that a person incurs in bringing an action under this section.

IV. PRIVATE ACTION FOR RETALIATION (WHISTLEBLOWER PROTECTION)

Any person who is discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against in the terms and conditions of employment by the employer because of lawful acts done by the person in furtherance of an action under this section,

including investigation for, initiation of, testimony for, or assistance in an action filed or to be filed under this section, shall be entitled to all relief necessary to make the employee whole. Such relief shall include reinstatement with the same seniority status such person would have had but for the discrimination, two times the amount of back pay, interest on the back pay, and compensation for any special damages sustained as a result of the discrimination, including litigation costs and reasonable attorneys' fees. A person may bring an action in the appropriate court of the Government for the relief provided in this subsection.

V. LIMITATION OF ACTIONS

- A. Statute of limitations. A civil action under Section III may not be brought more than 10 years after the date on which the violation was committed.
- B. Retroactivity. A civil action under Section III may be brought for activity prior to the effective date of this Act if the limitations period set in Subdivision A. has not lapsed.
- C. Burden of proof. In any action brought under Section III, the Government or the qui tam plaintiff shall be required to prove all essential elements of the cause of action, including damages, by a preponderance of the evidence.
- D. Estoppel. Notwithstanding any other provision of law, a guilty verdict rendered in a criminal proceeding charging false statements or fraud, whether upon a verdict after trial or upon a plea of guilty or nolo contendere, shall estop the defendant from denying the essential elements of the offense in any action which involves the same transaction as in the criminal proceeding and which is brought under subdivision A, B, or C of Section III.

Anti-Kickback Statute

I. OVERVIEW OF THE FEDERAL ANTI-KICKBACK STATUTE:

- A. The Federal Anti-Kickback Statute's main purpose is to protect patients and federal health care programs from fraud and abuse. The Federal Anti-Kickback Statute prohibits certain conduct involving improper payments in connection with the delivery of items or services. These prohibitions apply to anyone who knowingly and willfully solicits or receives any payment in return for referring an individual to another person for the furnishing, or arranging for the furnishing, of any item or service that may be paid in whole or in part by the Medicare, Medicaid, or other federally funded health care program.
- B. The federal Anti-Kickback Statute applies where an individual offers or makes payments to another person in order to induce referrals or other prohibited conduct. Illegal payments or solicitations of payments include those in cash or in kind, i.e., goods, those made directly or indirectly, and those made overtly or covertly.

II. LIABILITY FOR VIOLATIONS OF THE ANTI-KICKBACK STATUTE:

- A. Health organizations and providers that violate the Anti-kickback Statute can be subject to a maximum civil monetary penalty of \$25,000, imprisonment up to five years, or both.
- B. Conviction would also lead to automatic exclusion from the Medicare, Medicaid, and other federally funded health care programs. Exclusion from these programs may also be sought by the Department of Health and Human Services ("HHS") through an

administrative proceeding, without the need to initiate a criminal prosecution. Responsibility for enforcement of the statute is delegated within HHS to the Office of the Inspector General ("OIG").

- C. Employer prohibits bribes or kickbacks, including a complex array of discounts, rebates, profit-sharing agreements, or other business arrangements that would violate federal laws such as the Anti-Kickback Statute.

Stark Laws

I. OVERVIEW OF THE STARK LAWS:

Stark I and II are federal statutes that prohibit providers from making referrals to any entity in which they, or an immediate family member, have a financial relationship and which provides certain designated health services, unless an exception applies. A financial relationship includes, but is not limited to, ownership or investment interest, and compensation arrangements.

II. LIABILITY FOR VIOLATIONS OF THE STARK LAWS:

- A. Providers that violate the Stark Laws can be subject to the denial of payment of all designated health service claims and civil money penalties for knowing violations of the prohibitions.
- B. Violations may also be pursued under the Federal False Claims Act.
- C. Employer prohibits referrals and prohibits providers from referring patients for health care services to entities in which the provider has a financial relationship that would violate federal laws such as Stark.

Training

I. ALL EMPLOYEES OF COMPANY:

- A. Consumer and Caregiver Training: A copy of this Summary is attached as an Addendum to the Company's Corporate Compliance Policy and provided to all employees. The Corporate Compliance Policy, with the False Claims Act Addendum, is provided to all new consumers and caregivers during orientation. In addition, all employee handbooks and consumer training manuals contain a summary of the False Claims Act, included in the Medicaid Fraud section of the handbooks and manuals.
- B. Administrative Staff: Comprehensive training is conducted with all managers and staff using the training booklet "Deficit Reduction Act Compliance Training Program – An Overview of the False Claims Act and Federal Health Care Programs."

- #### II. CONTRACTORS AND AGENTS: All contractors and agents of the Company are provided with a copy of this Summary and the applicable State False Claims Act Summary.

ADDENDUM 2

MONTANA FALSE CLAIMS ACT & MEDICAID FRAUD

January 2007

- I. OVERVIEW OF MONTANA FRAUD AND ABUSE LAWS
 - A. The Montana False Claims Act is contained in M.C.A. §17-8-401-412. The Montana False Claims Act statute includes liability for actions such as submitting fraudulent claims, providing false records, and knowingly benefiting from the submission of a false claim and failing to report it within a reasonable time.
 - B. In addition to the violations contained in Montana's False Claims Act, the Montana Medicaid Fraud statute, M.C.A. §45-6-313, includes penalties for kickbacks, bribes, or rebates paid under the Medicaid program and for payments made and/or received for referring a recipient to another provider.
- II. LIABILITY FOR VIOLATIONS OF MONTANA FRAUD AND ABUSE LAWS
 - A. In a civil action brought under the Montana False Claims Act, a court shall assess not less than two times and not more than three times the amount of damages that a governmental entity sustains because of the person's act, along with cost and attorney fees, and may impose a civil penalty of up to \$10,000 for each act. Depending on the circumstances, the person committing the fraud may also be subject to a criminal proceeding and additional penalties.
 - B. Medicaid fraud convictions range from fines of \$1,000 and/or imprisoned in the county jail for 6 months, to fines of \$50,000 and/or imprisonment in the state prison for 10 years. A person convicted of Medicaid fraud may be permanently suspended from participation in the Medicaid program.
 - C. Criminal actions are pursued by the government. Civil actions may be pursued by the government or private industry. With some exceptions, persons who have engaged in unlawful acts pursuant to the False Claims Act may be liable to the United States government for a civil penalty that is not less than \$5,000 and not greater than \$10,000 **plus** three times the amount of damages the government sustains because of the act of that person.
- III. DEFINITIONS
 - A. FRAUD

The intentional deception or misrepresentation that an individual knows, or should know to be false, or does not believe to be true, and makes, knowing the deception could result in some unauthorized benefit to himself or some other person(s).
 - B. FRAUD & ABUSE

Fraud: To purposely bill for services that were never given or to bill for a service that as a higher reimbursement than the services produced.

Abuse: Payment for items or services that are billed by mistake by providers but should not be paid for by Medicare/Medicaid. This is not the same as Fraud.

IV. TRAINING

The Act requires that all Company employees, contractors, and agents receive training or education relating to the pertinent elements of the Act.

Please review the **Corporate Compliance Policy** and additional information relating to Fraud and Abuse in the **Employee Handbook**.

If you have any questions regarding this subject, please contact your manager, supervisor, or the Corporate Compliance Officer.

**EMPLOYEES ARE OBLIGATED TO REPORT POTENTIAL FRAUD AND ABUSE.
EMPLOYEES WHO IN GOOD FAITH REPORT SUSPICIONS OF MEDICAID FRAUD
OR ABUSE ARE PROTECTED FROM ANY FORM OF RETALIATION.**

FITNESS FOR DUTY**DRUG FREE WORKPLACE POLICY**

Revision Date 5/1/2009 POLICY STATEMENT

Because drug and alcohol abuse in the workplace results in decreased productivity, increased liability exposure, and higher workers' compensation insurance premiums, Consumer Direct ("Company") has a substantial and vested interest in not only providing, but also ensuring, a drug-free workplace for the safety and welfare of employees and consumers, as well as the Company.

OBJECTIVES

The goal of this Policy is to monitor and address any workplace or work time situation wherein a Supervisor or Manager determines an employee is unfit for duty, and/or address any substance abuse issues affecting the workplace, while adhering to the procedural requirements imposed by law.

RESPONSIBILITY

The Human Resources Manager is responsible for the overall implementation and management of the Fitness For Duty Drug Free Workplace Policy. This includes communication of the Policy's Standards of Conduct to all new employees, investigation of reports of violations of the Policy, and providing assistance to employees who voluntarily seek help with drug or alcohol dependency issues. The Risk Manager will assist the Human Resources Manager, as needed.

Senior Management approves and supports all aspects of this Policy.

Approved by: Signature on file Date: May 1, 2009

Signature

Bruce Kramer

/ Senior Vice President

Name

/ Title

SCOPE

Compliance with this Policy is required of all Company employees.

1. Standards of Conduct. The following standards of conduct apply to all employees:
 - a. Employees are strictly prohibited from working while unfit for duty which may include but is not limited to impairment resulting from the use of legal or illegal drugs or alcohol.

- b. The use, possession, transportation, purchase, promotion, or sale of dangerous drugs on Company property, while performing Company business, or while attending a Company function is strictly prohibited. In addition, the Company prohibits an employee from being at work under the influence of alcohol or dangerous drugs. Dangerous drugs are those drugs designated as controlled Substances in Title 21 of the United States Code, Section 812, except a drug used pursuant to a valid prescription or as authorized by law. Other than as set forth in subparagraph c. below, the use by employees of alcohol and/or being under the influence of alcohol while working, while on Company property, or while using a Company vehicle or equipment, is prohibited.

The term “Company property” is used in its broadest sense and includes all land, property, buildings, structures, installations, parking lots, and means of transportation owned by or leased by the Company or otherwise being utilized for Company business. Private vehicles used by employees for work-related activities and vehicles parked on Company property are included within this prohibition.

- c. If approved, employees may bring or consume alcoholic beverages on Company premises in connection with and during Company-authorized events, but only to the extent that such use does not lead to impaired performance, inappropriate behavior, endangering the safety of any individual or violation of applicable laws.

2. Policy on Rehabilitation.

- a. Any employee who feels that he or she has a problem with some form of chemical dependency is encouraged to seek assistance. Requests for information concerning such assistance will be kept confidential. An employee seeking assistance for drug or alcohol dependency **may be** afforded coverage under the Company's health care plan. The employee will need to review their benefit plan document to determine coverage issues.
- b. The Company will grant rehabilitation leave to employees seeking treatment on a voluntary basis. To request leave, employees must contact the Human Resources Manager. To be eligible for paid leave (use of sick or vacation days), employees must have completed the eligibility period of employment prior to seeking sick or vacation pay leave. Employees who have been with the Company for less than the described eligibility periods of time **may be** entitled to the same total leave, but it will be without pay. Once the Company has initiated a drug and alcohol test process for an individual employee, that employee no longer has the right to request treatment on a voluntary basis. The cost of rehabilitation will be at the employee's expense, except to whatever extent covered by the Company's health care plan.
- c. Any employee who leaves a treatment program prior to completion of, and proper discharge from, the program will be immediately terminated from employment.

3. Sanctions. The following sanctions shall apply to employees violating the Company's standards of conduct, for being unfit for duty, or testing positive for dangerous drugs or alcohol:
 - a. Employees who violate company policy regarding standards of conduct set forth herein are subject to discipline up to and including immediate dismissal.
 - b. Employees who knowingly create a dangerous situation by working while impaired as a result of prescription or over-the-counter pain killers or other medicines, are subject to discipline, up to and including immediate dismissal.
 - c. Employees who test positive for dangerous drugs or alcohol pursuant to the procedures set forth below are subject to discipline up to and including immediate dismissal.
 - d. Employees who test positive the first time for dangerous drugs or alcohol may also be required to participate in a drug and/or alcohol counseling treatment or rehabilitation program at the employee's expense (unless covered by applicable health coverage), as an alternative to termination. Testing positive for dangerous drugs and/or alcohol a second time, will result in immediate termination.
 - e. Employees who test positive for dangerous drugs or alcohol will be subject to follow-up testing including random testing.
 - f. No negative sanctions will be imposed on an employee by the Company if the employee presents a reasonable explanation or medical opinion indicating the positive test results were not caused by illegal or otherwise prohibited use of dangerous drugs or by alcohol consumption. This explanation must be given to the Medical Review Officer ("MRO") and confirmed as a reasonable explanation, resulting in the rendering of the test as negative. Any such explanation will be treated as confidential
 - g. Refusal by an employee to submit to initial testing, follow-up testing, or random testing will be deemed a positive test and therefore subject the employee to immediate dismissal.
 - h. Employees who attempt to tamper with drug or alcohol test samples are subject to immediate dismissal.
4. Types of Testing. The Company may perform the following types of testing for dangerous drugs and alcohol:
 - a. Fitness for duty reasonable suspicion testing of applicable employees.
 - b. Follow-up and random testing of employees who test positive, but per Management prerogative have not been immediately terminated. Follow-up and random testing may be performed up to two years from the date of the positive test.

- c. Testing of applicable employees involved in work-related accidents causing death or personal injury or property damage.
- d. Testing of applicable employees involved, or suspected of being involved, in causing or contributing to any work-related injuries.

All compensated employees, including officers, directors and supervisors are subject to this Policy. However, this does not include independent contractors.

Fitness For Duty Reasonable Suspicion Testing

Employees will be subject to a Fitness For Duty medical evaluation, to include appropriate current methodologies for drug and alcohol testing when any Supervisor or Manager determines there are reasons to believe that the employee is or was at work while in violation of this Policy or if the Company has reason to believe that an employee has negatively impacted the Company's reputation via after hours use of dangerous drugs or alcohol. Testing methodologies include but are not limited to: urinalysis, saliva, breathalyzer, hair follicle, etc. A fitness for duty reasonable suspicion referral for testing will be made on the basis of documented, specific, contemporaneous, articulable observations concerning an employee's appearance, behavior, and speech. The following, not all-inclusive, list of conditions may be signs that an employee is under the influence of drugs and/or alcohol and, if at work, is unfit for duty:

- Abnormally dilated or constricted pupils
- Dulled mental processes
- Glazed stare - redness of eyes (sclera)
- Flushed face
- Change of speech (e.g., faster, or slower)
- Redness under nose
- Needle marks
- Change in personality (e.g., paranoia)
- Poor concentration
- Constant fatigue or hyperactivity
- Slurred speech
- Smell of alcohol
- Excessive, unexplained absences
- Slowed reaction rate
- Difficulty walking
- Forgetfulness/performance faltering

Reasonable suspicion determinations will be made by any Manager or Supervisor who reasonably concludes that an employee may be in violation of this Policy. A fitness for duty medical evaluation, including drug testing, may be conducted anytime while an employee is on duty, immediately before or after the employee's regular work period, or anytime after hours if it is determined the employee's behavior is negatively reflecting on the Company's

reputation. While waiting for the results of a drug test, the employee will be assigned to non-safety-sensitive functions.

5. Dangerous Drugs to be Tested for. The Company will utilize a 10-Panel test for the following types of dangerous drugs:

	<u>Initial Screen</u>	<u>Confirmation Screen</u>
Marijuana (THC)	50ng/ml	15ng/ml
Cocaine Metabolites	300ng/ml	150ng/ml
Opiates	2000ng/ml	300ng/ml
Amphetamines	1000ng/ml	500ng/ml
PCP	25ng/ml	25ng/ml
Benzodiazepines	200ng/ml	50ng/ml
Barbiturates	200ng/ml	200ng/ml
Methaqualone	300ng/ml	300ng/ml
Propoxyphene	300ng/ml	150ng/ml
Methadone Ethanol	300ng/ml	150ng/ml

The Company reserves the right to modify this list from time-to-time to include additional substances in the Panel.

6. Prohibited Alcohol Concentration Level. Employees who test positive for alcohol concentration at or above .04 and/or are materially impaired will be deemed to be in violation of this Policy.
7. Testing Procedures. Fitness for duty medical evaluations will be conducted during, or immediately before or after the regular work period of the employee to be tested, and the time spent by the employee while being tested, and in going to and from the testing facility, will be considered work time for purposes of compensation and benefits. All drug and alcohol testing will be conducted at Company-designated laboratories approved or certified by the United State Department of Health and Human Services, the College of American Pathologists, or the State Department of Health Services. The Company has contracted with state-approved drug and alcohol testing service companies to perform all testing, using scientifically accepted analytical methods and procedures, which may involve urinalysis, saliva, breathalyzer, hair follicle, or any other current methodology utilized by licensed testing facilities, including any other reliable and scientifically accepted industry available tests that may be developed. All test samples will be labeled in such a manner as to reasonably preclude the possibility of misidentification of the employee tested in relation to the test result provided by the testing entity.

Positive tests will be subject to confirmation through a chromatographic technique, such as gas chromatography-mass spectrometry or another comparably reliable, analytical method. Confirmed positive tests will be reviewed by the Medical Review Officer prior to the imposition of sanctions against an employee. The initial test will be at the Company's expense and employees will be paid at their regular rate, including benefits, for time

attributable to the testing procedure.

All testing results are confidentially maintained by the Human Resources Manager.

A copy of the testing protocols is available from the Human Resources Manager.

8. Dispute Resolution Procedures. If an employee is tested for drugs and alcohol and the employee disputes the test result or believes that they have a reasonable explanation for a failed test, the employee will be given the opportunity to provide the Medical Review Officer with any medical information that is *relevant* to interpreting the test *results*, including information concerning currently or recently used prescription or non-prescription drugs.

The employee will be provided a copy of the test report. The employee has the right to request an additional test of the split sample by an independent laboratory selected by the person being tested. If a second test is requested, the cost of such test will be at the employee's expense if the test is positive and at the Company's expense if the test is negative. Employees with positive drug or alcohol tests will be offered the opportunity, in a confidential setting, to provide information that they believe may tend to rebut or explain the positive results obtained in their test. The Human Resources Manager will make the final employment decision or recommendation after considering the results of any drug test(s).

9. Confidentiality Requirements. All information, interviews, reports, statements, memoranda, and test results shall be confidential and shall not be disclosed to anyone, except:
 - a. The tested employee.
 - b. The Company's Human Resources Manager.
 - c. In connection with any legal or administrative proceeding arising out of the implementation of sanctions, or in response to inquiries relating to a work-related accident involving death, personal injury, or property damage when there is reason to believe that the employee may have caused or contributed to the accident.
 - d. Information obtained in the testing process that is unrelated to the use of dangerous drugs or alcohol may not be released by the Medical Review Officer to the employer.
10. Chain of Custody Requirements. The collection, transportation and confirmation testing of any drug test samples will be performed in accordance with 49 C.F.R. §40.73.
11. Summary of Criminal Sanctions for Use of Dangerous Drugs. The manufacture, distribution, possession, or use of dangerous drugs (other than pursuant to a valid prescription or otherwise authorized by law) is illegal under State and Federal law, and is subject to various

criminal sanctions, including fines of up to \$50,000 and prison sentences of up to life in prison. In some cases there are mandatory minimum prison sentences. Federal sanctions are generally more severe than are State sanctions.

12. Distribution of Safety Materials. Company will make information available to all employees concerning the health and workplace safety risks of using controlled substances and alcohol. These materials will be distributed at the time each employee receives a copy of this Policy and to all employees who test positive for dangerous drugs or alcohol. Employees wishing to receive additional copies of these materials may do so by contacting the Company's Human Resources Department.
13. Search and Inspection. While on Company premises or while engaged in Company business, employee vehicles, desks, equipment, lockers, brief cases, back packs, purses, etc. may be searched or inspected by a member of Management at any time, if the company feels there is reasonable cause to do to.
14. Pre-Employment Testing. At this time, the Company has chosen not to engage in pre-employment drug or alcohol testing, but reserves the right to change this policy at any time and without advance notice.

EXPOSURE CONTROL PLAN

Policy

The Company (“Company”) is committed to providing a safe and healthful work environment for its entire staff. In pursuit of this endeavor, the following Exposure Control Plan (“ECP”) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030 “Occupational Exposure to Bloodborne Pathogens.”

The ECP is a key document to assist the Company in implementing and ensuring compliance with the standard, thereby identifying employees potentially at risk for occupational exposure to blood or other infectious materials and therefore are at risk for exposure to HIV and HBV.

This Plan is reviewed with all employees at orientation and thereafter at least annually.

Approval

Approved by:	<u>Signature on File</u>	Date:	<u>April 18, 2008</u>
	Signature		
	<u>Bruce Kramer</u>	/	<u>Senior Vice President</u>
	Name	/	Title

Program Administration

The Risk Management Department is responsible for the implementation of the ECP. The Risk Management Department will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

Those employees who are determined to have occupational exposure to blood or other potentially infectious materials (“OPIM”) must comply with the procedures and work practices outlined in this ECP.

The Company will maintain and provide all necessary personal protective equipment (“PPE”), engineering controls (e.g., sharps containers), labels and red bags as required by the standard and applicable to home health care.

The Risk Management Department is responsible for maintaining appropriate employee health and OSHA records.

The Company is responsible for training and documentation of training. The Risk Management Department is responsible for making the written ECP available to employees, OSHA, and the NIOSH representatives.

Exposure Determination

OSHA requires employers to perform an exposure determination concerning which employees may incur occupational exposure to blood or other potentially infectious materials. The exposure determination is made without regard to the use of personal protective equipment (i.e., employees are considered to be exposed even if they wear personal protective equipment.) This exposure determination is required to list all job classification in which all employees may be expected to incur such occupational exposure, regardless of frequency. At this facility, the following job classifications are in this category.

In addition, OSHA requires a listing of job classifications in which some employees may have occupational exposure. Since not all the employees in these categories would be expected to incur exposure to blood or other potentially infectious materials, tasks or procedures that would cause these employees to have occupational exposure are also required to be listed in order to clearly understand which employees in these categories are considered to have occupational exposure. The job classifications and associated tasks for these categories are as follows:

- Job Classifications in which *all* employees have Occupational Exposure:
 - Nurses, Home Health Aides, C.N.A.s., P.C.A.s, Habilitation Aides

- Job Classifications in which *some* employees have Occupational Exposure:
 - Physical Therapists
 - Occupational Therapists
 - Speech Therapists
 - Medical Social Workers

- Job Classifications in which there is *little* Chance of Exposure:
 - Office staff
 - Administrative personnel

- Tasks and Procedures in Which Occupational Exposure May Occur:
 - Handling of blood, blood products or body fluids or objects contaminated thereof
 - Invasive procedures
 - Care of newborns, infants, and children
 - Phlebotomy or vascular access procedures and the care thereof
 - Contact with laboratory or pathological specimens
 - Wound care
 - Contact with mucous membranes or non-intact skin
 - Handling or disposal of medical waste
 - Cleaning or processing of contaminated equipment

- Dialysis
- Suctioning or sputum induction
- CPR and intubation
- Handling of soiled linen
- Cleaning or decontamination of environmental surfaces

Method of Compliance

Methods of compliance to include but not limited to:

- ◆ Standard Precautions
All employees will utilize standard precautions.
- ◆ Exposure Control Plan
Employees covered by the bloodborne pathogens standard receive an explanation of the ECP during their initial training session. It will also be reviewed in their annual refresher training. All employees have an opportunity to review this Plan at any time during their work shifts by contacting the Risk Management Department. If requested, the employee will be provided with a copy of the ECP free of charge and within 15 days of the request.
- ◆ Engineering Controls and Work Practices
Engineering controls and work practices controls will be used to prevent or minimize exposure to bloodborne pathogens. The specific engineering controls and work practice controls used are listed below:
 - ❖ Handwashing Policies and Procedures
 - ❖ Isolation Practices
 - ❖ Medical Waste Policies and Procedures
 - ❖ Personal Protective Equipment Policies and Procedures

Employees are prohibited from eating, drinking, smoking, applying makeup or handling contact lenses in work areas where there is a reasonable likelihood of occupational exposure. Food and drink should not be stored in refrigerators, freezers, shelves, cabinets or on countertops where blood or other potentially infectious materials are present.

Needles, razor blades, broken glass and other contaminated “sharps” must be placed directly in a puncture-resistant, biohazard sharps container at the point of use. Gloves must always be worn when handling sharps.

The Risk Management Department identifies the need for changes in engineering control and work practices through review of records, maintaining incident logs and analyzing trends by Safety Committee activity.

The Safety Committee will evaluate new procedures or new products regularly by reviewing literature, supplier information, and product demonstration.

Both front line workers and management officials are involved in this process, by posted notice, orientation, memo in pay checks, or annual recertification.

The Risk Management Department will ensure effective implementation of these recommendations.

Hepatitis B Vaccination

Hepatitis B vaccine is available to all employees (who have some risk of occupational exposure) unless the employee has previously received the complete Hepatitis B vaccination series, antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons.

The Hepatitis B vaccination series is available at no cost after training and within 10 days of initial assignment to employees identified as having risk for occupational exposure. Vaccinations will be provided by the Public Health Department.

Employees who decline to accept Hepatitis B vaccination must also sign a consent form. This does not prohibit the employee from choosing to receive the vaccine at a later date nor shall it adversely impact their job assignment.

Employees will receive counseling from a health care provider on the Hepatitis B vaccine, including information on efficacy, safety, method of administration, and the benefits and side effects of being vaccinated.

Post-Exposure Follow-up

Should an exposure incident occur, contact your department supervisor.

Following an exposure incident, all employees shall receive a confidential medical evaluation and follow-up that includes these elements:

- ❖ Documentation of the route(s) of exposure and the circumstances under which the exposure occurred.
- ❖ A description of the employee's duties as they relate to the incident.
- ❖ Identification and documentation of the source individual, when known.
Arrangements will be made and consent obtained from the source individual to be tested as soon as possible to determine HIV, HCV and HBV infectivity; with documentation that the source individual's test results were conveyed to the employee's health care provider. If the source individual is already known to be HIV, HCV and/or HBV positive new testing need not be performed.
- ❖ Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).

- ❖ After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status.
- ❖ If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.
- ❖ The employee's relevant medical records and vaccination dates shall be made available to the healthcare professional evaluating the employee.

Results of the source individual's testing, if known, shall be made available to the exposed employee and the employee shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.

A written report of this medical evaluation shall be available to the employee within fifteen (15) days of exposure. This report will be limited to:

- ❖ The employee being informed of the results of the evaluation
- ❖ The employee being told of any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment

All other finding or diagnoses will remain confidential and will not be included in the written report.

Procedures For Evaluation The Circumstances Surrounding An Exposure Incident

The Risk Management Department will review the circumstances of all exposure incidents to determine:

- Engineering controls in place at the time
- Work practices followed
- A description of the device being used
- Protective equipment or clothing that was used at the time of the exposure incident (gloves, eye shields, etc)
- Location of the incident
- Procedure being performed when the incident occurred
- Employee's training

The Risk Management Department will record all percutaneous injuries from contaminated sharps in the Sharps Injury Log.

If it is determined that revisions need to be made, the Risk Management Department will ensure that appropriate changes are made to this ECP. (Changes may include an evaluation of safer devices, adding employees to the exposure determination list, etc).

Employee Training

All employees who have occupational exposure to bloodborne pathogens receive training conducted by the Company.

All employees who have occupational exposure to bloodborne pathogens receive training on the epidemiology, symptoms, and transmission of bloodborne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:

- A copy and explanation of the standard.
- An explanation of our ECP and how to obtain copy.
- An explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident.
- An explanation of the use and limitations of engineering controls, work practices, and PPE.
- An explanation of the types, use, location, removal, handling decontamination and disposal of PPE.
- An explanation of the basis for PPE selection.
- Counseling from a health care provider on the Hepatitis B vaccine, including information on efficacy, safety, method of administration, the benefits of being vaccinated as well as the side effects of being vaccinated and that the vaccine will be offered free of charge.
- Information on the appropriate actions to take and persons to contact in any emergency involving blood or OPIM.
- An explanation of the procedure to follow if an exposure incident occurs including the method of reporting the incident and the medical follow-up that the employer is required to provide for the employee following an exposure incident.
- An explanation of the signs and labels and/or color coding required by the standard and used by the Company.
- An opportunity for interactive questions and answers with the person conducting the training session.

Training materials are available from the Company and the Risk Management Department.

Recordkeeping

Training Records:

- Training records are completed for each employee upon completion of orientation. These documents will be updated yearly and kept with the employee's personnel file.

Training records include:

- The dates of the training session
- The contents or a summary of the training session
- The names and qualifications of persons conducting the training
- The names and job titles of all persons attending the training sessions.

Employee training records are provided upon request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to the Human Resources Department.

Medical Records

Medical records are maintained for each employee with occupational exposure in accordance with 29 CFR 1910.1020 "Access to Employee Exposure and Medical Records.

The Risk Management Department is responsible for maintenance of the required medical records. These confidential records are kept in the Risk Management Department for at least the duration of the employment.

Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Such requests should be sent to the Risk Management Department.

OSHA Recordkeeping

An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements (29 CFR 1904). This determination and the recording activities are performed by the Risk Management Department.

Sharp's Injury Log

In addition to the §1904 Recordkeeping Requirements, all percutaneous injuries from contaminated sharps are also recorded in the Sharp's Injury Log. All incidents must include at least:

- The date of injury.
- The type and brand of the device involved.
- The department or work areas where the incident occurred.
- An explanation of how the incident occurred.

The Sharps Log is reviewed at least annually as part of the annual evaluation of the program and is maintained for at least five years following the end of the calendar year that they cover. The Log is maintained by the Risk Manager. If a copy is requested by anyone, it must have any personal identifiers removed from the report.

Communication of Hazards

All blood or potentially infectious materials shall have a biohazard label affixed to the container (blood and blood products for clinical use are exempt) or shall be stored in red bags or red containers.

SAFE DRIVING PROGRAM SUMMARY

Policy Statement

The Company (“Company”) has made a commitment to safety, service, and quality to both our employees and customers. All employees assigned the privilege of driving a Company vehicle, as well as employees using personal vehicles in the course of company business, have an obligation to operate said vehicles in accordance with Federal, State, and local laws, codes, and regulations. Every Company employee has the responsibility to exercise safe conduct and common courtesy toward the general public, motorists and pedestrians while operating a vehicle during the course of company business.

Motor Vehicle Record (MVR) Policy

It is a Company policy and requirement for employment that every employee with driving duties have a valid driver’s license and a motor vehicle record (“MVR”) that meets the grading requirements of the Company. This MVR policy applies to all drivers who operate a vehicle in the course of company business, including company-owned, leased, or private vehicles.

Insurance

All employees of the Company, who are authorized to use their personal vehicles in the course of company business, must carry adequate liability insurance coverage on their vehicle. The Company requires proof of insurance upon hire and periodically thereafter, as long as the employee is using their personal vehicle in the course of company business. Driving a personal vehicle without valid insurance is grounds for immediate termination.

The Law

Company employees are instructed to obey all traffic regulations at all times. Any violations of traffic laws and any fines resulting from citations are the responsibility of the individual receiving the citation. Employees with an excessive number of traffic violations will not be allowed to drive as part of their job. (See MVR policy.)

Cell Phones

It is against Company policy for anyone who is driving, in the course of company business, to talk on a cell phone – no exceptions. If an employee gets a call while driving, they must first pull over, and then answer the call, or simply let the call go to voice mail and check the message later, when not driving. If a call is missed, the driver must pull over before checking their voice mail. To use a cell phone during the course of Company business while in a vehicle, the vehicle must be parked.

Seat Belts

Motor vehicle accidents are the number one cause of on-the-job deaths. To reduce risk, Company employees and passengers are required to use vehicle-equipped restraining devices (any/all seat belts and shoulder straps) when driving or riding while on company business.

Accidents

All accidents are to be reported to the Risk Manager (via the Injury Hotline 877-532-8542, if necessary) as soon as reasonably possible, with written notification to follow within twenty-four (24) hours after the accident occurs.

As an employee of a Consumer Direct Care Network company (CDCN), you'll likely see or hear personal information that belongs to our service recipients and/or caregivers. Every day CDCN uses people's personal information to provide needed services. Because personal information is sensitive, we must take care to protect it as its disclosure could harm the individuals to whom it belongs. As such, CDCN employees must follow federal and state privacy laws.

This Guide will prepare you to recognize Personally Identifiable Information (PII) and Protected Health Information (PHI). You will learn CDCN's policies and procedures to safeguard PII & PHI, as well as the proper use and disclosure of PII & PHI. This Guide is meant for caregivers and nurses in co-employment, agency with choice, and agency-based traditional programs.

Please contact your local office or InfoPrivacy@consumerdirectcare.com if you have any questions or concerns about the topics in this Guide.

INTRODUCTION TO PII & PHI

PERSONALLY IDENTIFIABLE INFORMATION (PII)

PII is any information that links an individual's name with their Social Security Number, Driver's License number, Passport ID, Bank Account or Credit Card Account numbers, passwords, or other confidential information.

PROTECTED HEALTH INFORMATION (PHI)

PHI is more restrictive than PII. PHI is any information from a service recipient that has a unique identifier that could be used to identify an individual. Some examples of PHI are a service recipient's:

- Full name
- Social security number
- Date of birth
- Medical diagnosis
- Address
- Phone number
- Medical record
- Account number
- Email address

OVERVIEW OF PRIVACY LAWS

STATE PRIVACY LAWS

Most states have privacy laws regarding the ways businesses collect PII & PHI. These laws ensure that PII & PHI is collected and retained in a protected manner. CDCN provides services in several states and must follow the privacy laws of each state. In addition, CDCN has developed strict PII & PHI protection rules as company policy.

HEALTH INSURANCE PORTABILITY and ACCOUNTABILITY ACT (HIPAA)

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is a federal law that requires companies and their employees to maintain the privacy and security of PHI for individuals receiving health care. Specifically, HIPAA explains when PHI may be used or disclosed.

Key ways HIPAA rules protect PHI:

- PHI may only be shared with the individual’s consent or when specifically allowed by HIPAA.
- PHI may only be changed or destroyed using procedures described in HIPAA; this protects the integrity of the information.
- HIPAA provides additional overall security and privacy protections.

WHO MUST FOLLOW STATE PRIVACY LAWS & HIPAA?

State privacy laws require any business that collects PII & PHI to protect the information from improper disclosure.

Federal HIPAA law requires healthcare providers and their business associates to protect PHI from improper disclosure. CDCN and all of our employees are always required to comply with HIPAA standards.

SAFEGUARDING PII & PHI

HIPAA and state privacy laws require us to make sure that PII & PHI is protected and not shared with the wrong people. PII & PHI must be protected and kept confidential in handwritten, printed, electronic, or oral form.

KEEPING PII & PHI CONFIDENTIAL

The most common cause of unauthorized disclosures of PII or PHI is human error which can be prevented. Below are best practices to help you protect PII & PHI:

- Keep all PII & PHI confidential
 - Treat PII & PHI as a “need to know” event. Share as little information with as few people as needed to complete your task. This includes coworkers or other service recipients/caregivers.
 - Do not bring unauthorized individuals with you to a service recipient’s home without prior permission from the service recipient.
 - Be aware of who is around you when on the phone. Minimize PII & PHI shared over the phone and don't share information if a non-employee is nearby.
 - Do not leave PII or PHI in a place where others can see it.
 - Do not use social media to post, transmit, or distribute PII or PHI.
 - Only use secure channels to send PII or PHI to CDCN. If you cannot send PHI using a secure method, obtain client permission before sending the PHI via an unsecured

method.

- Limit Sharing
 - Do not discuss PII or PHI in public areas such as elevators, restrooms, reception areas, or other areas where you can be overheard. Talking with a non-employee about a service recipient’s unique name or any other minor detail can be considered a disclosure of PHI and may be subject to penalties.
 - Always make sure that you are giving PII or PHI only to individuals who are allowed to have it.

USE and DISCLOSURE OF PHI AND PII

WHAT ARE HIPAA “USES and DISCLOSURES” of PHI?

Use: occurs when a company that maintains PHI shares, analyzes, or examines the information.

Disclosure: occurs when PHI is shared, transferred, or released in any way by the individual or company holding the information.

WHEN CAN PII or PHI BE DISCLOSED?

CDCN’s policy states that PII cannot be disclosed without written authorization.

PHI may only be used or disclosed when one or more of the following situations is true:

1. The service recipient or their designated representative has agreed to the use or disclosure.
2. The service recipient or their designated representative allows information to be shared with a person involved in their health care.
3. PHI is being shared with the following:
 - Service recipient or their designated representative.
 - U.S. Department of Health and Human Services.
 - Covered Entity when CDCN is the Business Associate.
4. The use or sharing meets one of the HIPAA consent exceptions.

PII & PHI disclosed outside of these situations is considered an Unauthorized Disclosure. Please contact your local office, supervisor, or InfoPrivacy@consumerdirectcare.com if you have questions regarding whether a disclosure is authorized.

UNAUTHORIZED DISCLOSURES

WHAT ARE “UNAUTHORIZED DISCLOSURES” of PII & PHI?

“Unauthorized disclosures” of PII & PHI occur when PII or PHI is shared or released without the consent of the individual, or as otherwise authorized under state privacy law or HIPAA.

Examples of unauthorized disclosures include:

- Sharing the identity of, or information about, a service recipient with an unauthorized third party.
- Bringing a third party to a service recipient's home without permission.
- Speaking about a service recipient when a non-employee is present.

REPORTING PII or PHI DISCLOSURES

CDCN's Privacy Officer manages our Privacy Program. If you are concerned that PII or PHI has been disclosed without authorization or in violation of CDCN's Privacy Policy, please immediately tell your supervisor and email InfoPrivacy@consumerdirectcare.com to report the incident.

NON-COMPLIANCE PENALTIES

State penalties for disclosing PII in the wrong way can be applied to CDCN for failing to provide notification and identity theft protection to individuals affected. The cost of providing identity theft protection can range from \$50 to \$250 per person. The civil penalties for violating state statutes can range from \$10,000 to \$750,000.

Severe civil and criminal penalties can apply to CDCN and/or CDCN employees for disclosing PHI in the wrong way, even if it's an accident. Both CDCN and the individual employee can be held directly liable, and fines can range from \$100 to \$1,500,000.

Violations of state or federal privacy laws will result in corrective action, up to and including termination of employment.

Please remember to protect PII & PHI at all times and notify your local office immediately if you suspect an unauthorized disclosure has happened.