PROCEDURE STATEMENT:
Certain individuals in senior management (“Certifying Employees”) and certain direct/indirect reports of theirs (“Sub Certifiers”) are required to routinely certify in writing compliance with applicable federal and state requirements and obligations of Health Quest’s Corporate Integrity Agreement (“CIA”).

PROCEDURE:
A. The Compliance Department shall annually, or sooner as appropriate, approve a list of positions designated as Certifying Employees and Sub Certifier positions and approve a schedule for submitting Routine/Annual Management Certifications and Routine Management Sub-Certifications to the Chief Compliance Officer (“CCO”).
B. Certifying Employees and Sub Certifiers shall routinely and annually certify that their scope of responsibility is in compliance with applicable federal or state requirements, the Health Quest Systems, Inc. Code of Conduct, compliance policies and procedures and obligations of the CIA.
   1. Certifying Employees and Sub Certifiers will be trained and understand compliance in order to report compliance concerns or potential compliance infractions to the CCO, and to monitor and oversee activities for compliance within their scope of responsibility on an ongoing basis.
   2. Examples of compliance categories that the Certifying Employees and Sub Certifiers are expected to consider when determining compliance include, but are not limited to:
      a. Billing, coding, payment, and documentation (including Overpayments)
      b. Physician and/or referral sources (including Stark Law/Anti-Kickback Law)
      c. Quality of care
      d. HIPAA privacy and security
      e. Medical necessity
      f. Violations of policies, procedures, or processes (including violations of HQ’s Corporate Compliance policies)
      g. Correspondence with government agencies
      h. Purchase, sale, lease, or change of business units/locations
      i. Ineligible Persons
      j. Other topics that may arise
C. The Routine Management Sub-Certifications and Routine/Annual Management Certifications shall contain language appropriate, under the terms of the CIA, for the certifying employee to acknowledge that:
   1. He/she has been trained and understands compliance requirements and responsibilities.
   2. His/her responsibilities include assuring compliance within the scope of the certification:
   3. He/she has taken steps to promote compliance;
   4. He/she is reporting and providing explanation of compliance exceptions;
   5. His/her area of responsibility is in compliance, except as noted; and
   6. He/she understands that the certifications will be relied upon: (a) by HQ, for Routine Management Sub-Certifications, or (b) by HQ for Routine/Annual Management Certifications and by HQ and the U.S. Department of Health and Human Services Office of Inspector General (“HHS-OIG”), for Routine/Annual Management Certifications.

D. The CCO shall implement and maintain, with the ECC’s concurrence, a process that:
   1. Meets the Certification requirements of the CIA.
   2. Supports routine submission of Routine Management Sub-Certifications and Routine/Annual Management Certifications by Sub Certifiers and Certifying Employees.
   3. Certifying Employees and Sub Certifiers must ensure that statements contained in the Routine/Annual Management Certifications and Routine Management Sub-Certifications accurately reflect the activities in their areas of responsibility.
   4. Reconciles differences among Routine Management Sub-Certifications exceptions, Routine/Annual Management Certifications exceptions, and the Compliance Department disclosure log.

E. Sub Certifiers shall submit Routine Management Sub-Certifications to the Compliance Department in the format and due date established and by the Compliance Department.

F. Certifying Employees shall submit Routine/Annual Management Certifications to the Compliance Department in the format and due date established and by the Compliance Department.

G. The CEO, CCO and CFO and other Certifying Employees shall make such other written certifications to the HHS OIG as required by the CIA.

H. The CCO shall submit all Certifications to the HHS-OIG, as required by the CIA.

ENFORCEMENT:
All individuals whose responsibilities are affected by this process are expected to be familiar with the basic procedures and responsibilities created by this process. Individuals failing to comply with this process will be subject to appropriate remedial and/or disciplinary action, up to and including termination of any employment or other relationship, in accordance with this process.
### DOCUMENT RETENTION:
HQ will retain all documents relating to this process for a period of seven years after their creation.

### REFERENCES:
- United States Sentencing Commission, Guidelines Manual, Ch. 8 (Nov. 2015).
- HQ 5.1.24 Management Certification Policy

### POLICY HISTORY:
- Supersedes: 3/19/19
- Original Implementation Date: 5/25/18
- Date Reviewed: 3/13/20
- Date Revised: 5/25/2018, 3/19/19, 3/13/20

### APPROVAL:
W.A. McNulty by [Signature] 3.31.20

Policy Owner Date