PURPOSE:
To ensure compliance with, and promote awareness of, requirements under the federal Anti-Kickback Statute, Eliminating Kickbacks in Recovery Act of 2018 and the Physician Self-Referral Law, commonly referred to as the Stark law, and similar New York and Connecticut requirements.

POLICY:

I. Anti-Kickback Prohibition:

A. Health Quest Systems, Inc. (“HQ”), its officers, management, employees and agents shall not knowingly and willingly engage in activities that solicit, offer or receive payment of any kind of Remuneration for:

1. Referring an individual/patient to a person for the furnishing or arranging of an item or service;

2. Purchasing leasing, ordering or arranging for, or recommending purchasing, leasing or ordering any good, facility item or service, for which, Medicare, Medicaid or another Federal healthcare program pays; or

3. Referring a patient to a laboratory, clinical treatment facility or recovery home, for items or services paid by any payor; or

4. In exchange for referring an individual with a substance use disorder to a clinical service provider for clinical services.

B. HQ, its officers, management, employees or and agents who engage in potential anti-kickback activities, could be subject to penalties, which include fines, imprisonment and exclusion from Medicare, Medicaid or another Federal healthcare program pays; or

C. HQ, its officers, management, employees and agents must contact in-house legal counsel before engaging in business arrangements involving Anti-Kickback Statute “safe harbors” to determine whether anything of value is being offered or exchanged to induce referrals, recommendations or the purchase of goods or services reimbursable by a Federal healthcare program. The list of available “safe harbors” include but are not limited to:
• Investments in large, publicly held healthcare companies
• Joint ventures
• Space rental
• Equipment rental
• Personal services and management contracts
• Sales of retiring Physicians’ practices to other Physicians
• Referral services
• Warranties
• Discounts
• Employee compensation
• Group purchasing organizations
• Waivers of Medicare Part A inpatient cost-sharing amounts
• Physician recruiting in underserved areas
• Obstetrical malpractice insurance subsidies for underserved areas
• Sales of practices to hospitals in underserved areas
• Investments in ambulatory surgical centers
• Investments in group practices
• Referral arrangements for specialty services
• Cooperative hospital service organizations

D. The inducement of Referrals to HQ or to the other party shall never be an underlying purpose of the arrangement.

II. Stark Law:

A. A Physician or a Physician’s Immediate Family Member who has a Financial Relationship with HQ shall not make a Referral to HQ for the provision of DHS paid by Medicare, Medicaid or other Federal healthcare programs unless the provisions of this policy are met.

B. Each HQ Financial Relationship with a Physician or a Physician’s Immediate Family Member shall be in writing, reviewed by in-house legal counsel, signed by an HQ officer and currently in effect.

C. Each arrangement involving a Financial Relationship with a Physician shall meet a Stark Law exception listed below, and, if possible, an Anti-Kickback Statute safe harbor, identified above in Section I C, where applicable.

• Rental of office space
• Rental of equipment
• Employment relationships
• Personal service arrangements
• Physician recruitment
• Isolated transactions (e.g., onetime sale of property)
• Arrangements with hospitals (unrelated to DHS)
• Group practice arrangements with hospitals
• Payments from Physicians
• Charitable donations by Physicians
• Non-monetary compensation
• Medical staff incidental benefits
• Risk-sharing arrangements
• Compliance training
• Indirect compensation
• Referral service programs
• Obstetrics malpractice coverage assistance
• Professional courtesy
• Retention payments in underserved areas
• Community-wide health information systems
• Electronic prescribing services
• Donation of electronic health record items and services

D. HQ, its officers, management, employees and agents must contact in-house legal counsel before engaging in business arrangements with a Physician or a Physician group to determine if a Stark Law exception under Section II C permits payments to the Physician or Physician group.

E. Violations of the Stark Law may subject HQ, its officers, management, employees or agents to False Claim Act liabilities, which include treble damages, civil monetary penalties and possible exclusion from Medicare, Medicaid and/or other Federal healthcare programs.

DEFINITIONS:

**Designated Health Services (DHS):** Shall have the meaning set forth in 42 C.F.R. § 411.351 and includes: physical therapy, occupational therapy and speech-language pathology services; radiology and certain other imaging services; radiation therapy services and supplies; durable medical equipment and supplies; parenteral and enteral nutrients, equipment and supplies; home health services; prosthetics, orthotics, and prosthetic devices and supplies; outpatient prescription drugs; and inpatient and outpatient hospital services.

**Entity:** Shall have the meaning set forth in 42 C.F.R. § 411.351 and includes: A Physician’s sole practice or a practice of multiple Physicians or any other person, sole proprietorship, public or private agency or trust, corporation, partnership, limited liability company, foundation, nonprofit corporation, or unincorporated association that furnishes DHS. An Entity does not include the referring Physician himself or herself, but does include his or her medical practice. An “Entity”
Title: Compliance with Anti-Kickback Statutes and Stark Laws
Reference Number: HQ 5.1.26
Signature: Chief Compliance Officer
Page #: Page 4 of 5

includes the person or Entity billing for the DHS as well as the person or Entity that performs the service that is billed by another as DHS.

Financial Relationship: Two types of financial arrangements are covered under the Stark Law (both direct and indirect): 1) Arrangements involving Physician ownership or investment interest in a DHS Entity; and 2) Compensation arrangements between a referring Physician and a DHS Entity to which the Physicians make referrals.

Immediate Family Member: Shall have the meaning set forth in 42 C.F.R. § 411.351 and includes: husband or wife; birth or adoptive child; parent, or sibling; stepparent, stepchild, stepbrother, or stepsister; father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law; grandparent or grandchild; and spouse of a grandparent or grandchild.

Physician: For the purposes of the Stark Law, a “Physician” is defined in 42 C.F.R. § 411.351 as “a doctor of medicine or osteopathy, a doctor of dental surgery or dental medicine, a doctor of podiatric medicine, a doctor of optometry, or a chiropractor.” A Physician and the professional Entity of which he or she is a sole owner are the same for purposes of the Stark Law. Therefore, if a healthcare practitioner who is not a “Physician” under this definition has a Financial Relationship with an Entity, the Stark Law does not apply to the arrangement or any referrals made by that practitioner.

Referral: Shall have the meaning set forth in 42 C.F.R. § 411.351 and includes: a request by a Physician that includes the provision of any DHS; the establishment of a plan of care by a Physician that includes DHS; the certifying or recertifying of the need for DHS; or the request for a consultation with another Physician and any test or procedure ordered by or to be performed by that other Physician. The definition specifically excludes DHS personally performed or provided by the referring Physician. “Personally performed” is to be taken literally; a service that is performed by a technician or a non-Physician practitioner at the direction of a Physician is not personally performed by that Physician.

Remuneration: Shall have the meaning set forth in 42 C.F.R. § 1003.101, and refers to the transfer of anything of value, including any items or services, for free or for other than fair market value.

III. REPORTING CONCERNS:

Activities which are (or appear to be) in violation of this policy should be immediately reported to the Corporate Compliance Office (845) 475-9755 or anonymously to the Compliance Hotline (844) 937-9326, or the Office of General Counsel.
ENFORCEMENT:
All HQ officers, management, employees and agents whose responsibilities are affected by this policy are expected to be familiar with the basic procedures and responsibilities created by this process. Failure to comply with this policy will be subject to appropriate remedial and/or disciplinary action, up to and including termination of any employment or other relationship.

DOCUMENT RETENTION:
HQ will retain all documents relating to this process for a period of seven (7) years after their creation.

REFERENCES:
42 CFR § 411.350 et seq. Stark Law Regulations
42 USC §1395mm Stark Law Statute
New York Public Health Law §§ 238 to 238-e; §4501
New York Education Law §6530
10 NYCRR Part 34
42 USC §1320a-7b Anti-Kickback Statute
42 CFR § 1001.952 Anti-Kickback Statute Safe Harbor Regulations
New York Education Law§ § 6530(18),(19)
Social Services Law§ 366-d
18 NYCRR 515.2
Conn. Gen. Stat. § 20-579 and § 53a-161d
Eliminating Kickbacks in Recovery Act of 2018

POLICY HISTORY:
Supersedes: 2/13/2019
Original Implementation Date: 2/14/2018
Date Reviewed: 2/24/2020
Date Revised: 2/13/2019, 2/24/2020

APPROVAL:

Policy Owner

Date