Policy:

To affirm that HPSM does not tolerate any form of retaliation or intimidation in response to good faith reports of compliance concerns and encourages an environment in which compliance concerns are promptly and appropriately addressed.

CMS guidelines on implementing a comprehensive compliance plan require that HPSM adopt, publicize, and enforce a zero tolerance policy for intimidation and retaliation against any employee or subcontractor who participates in HPSM's Compliance Program in good faith by, including but not limited to reporting potential issues, investigating issues, conducting self-evaluations, audits and remedial actions, and reporting to appropriate officials.

Scope

This procedure applies to (check all that apply):

- ☒ All LOBs/Entire Organization
- ☐ CCS
- ☐ Medi-Cal Expansion
- ☐ Medi-Cal Adults
- ☐ Medi-Cal Children
- ☐ Medi-Cal
- ☐ Other (specify)
- ☐ ACE
- ☐ HealthWorx
- ☐ Medi-Cal Children
- ☐ CA-CMC / MMP
- ☐ Medi-Cal
- ☐ Other (specify)

Responsibility and Authority

- The Chief Compliance Officer is responsible for implementing a Compliance Program to ensure that HPSM services are provided in accordance with all applicable federal, state, and county laws and regulations.
Definitions

*Employee* means any full or part-time employee, temporary employee, interning employee, volunteer or consultant working for or with Health Plan of San Mateo.

*Subcontractor* means any vendor, FDR, or other HPSM subcontracted individual or entity.

Procedure

1.0 All HPSM employees and subcontractors have an obligation to report any activity that appears to violate applicable laws, regulations, rules, policies or the Code of Conduct. Reports of actual or potential violations may be made up the individual’s chain of command, to the Chief Compliance Officer, or anonymously to the Compliance Hotline.

2.0 No staff member will intimidate any employee or subcontractor to:
   2.1 persuade, deter or prohibit an individual from participating in HPSM's Compliance Program; or
   2.2 impede or otherwise delay an individual's participation in the Compliance Program

3.0 No staff member will retaliate against any "reporting" individual who:
   3.1 Makes a verbal or written report or complaint in relation to a compliance issue.
   3.2 Provides information to an investigation or testifies against the alleged offending individual or procedure;
   3.3 Objects to or refuses to participate in an activity he/she feels is in violation of federal or state law;
   3.4 Is involved in any compliance review; or
   3.5 Discloses or threatens to disclose information about a situation he/she feels is inappropriate, or potentially illegal.

4.0 Retaliation occurs when an individual:
   4.1 Engages in a protected activity, and
   4.2 Suffers an adverse employment action, and
   4.3 There is a causal connection between the protected activity and the adverse employment action.

5.0 In the absence of a causal connection between the protected activity and the adverse action, retaliation does not exist. For example, if a manager or supervisor disciplines an employee on the basis of the employee's job performance, that would not amount to retaliation. However, if a manager or supervisor
disciplines an employee simply because the employee has reported compliance concerns, that discipline could be retaliatory.

6.0 The Chief Compliance Officer, and if appropriate the Compliance Committee, will investigate any report of alleged retaliation or intimidation. The Chief Compliance Officer will report to the Compliance Committee the findings of any inquiry, and if the retaliation allegations are found to be true, the Compliance Committee will make recommendations of appropriate disciplinary action to the Chief Executive Officer.

7.0 Any employee of HPSM who intimidates an individual or retaliates against a reporting individual may be subject to discipline up to and including termination.

8.0 Any employee who has been disciplined by his or her supervisor and who thereafter intimidates any other employee in connection with or as a result of that discipline will be subject to further discipline up to and including termination.

9.0 Individuals who self-report are not insulated from responsibility for their conduct. However, prompt and forthright disclosure of an error by an employee, even if the error constitutes inappropriate or inadequate performance, will be considered a mitigating factor on the part of the employee.

Related Documentation

- CP.000 Compliance Program
- CP.003 Reporting Compliance Concerns
- CP.004 Compliance Hotline
- CP.026 Code of Conduct

Attachments

- None

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