MAIMONIDES HEALTH

CODE: COMPL-001 (Reissued)
DATE: July 16, 2026
ORIGINALLY ISSUED: June 17, 2002

SUBJECT: SCREENING OF FEDERAL AND STATE EXCLUSION LISTS

I. POLICY

The U.S. Department of Health and Human Services, Office of Inspector General (the "OIG") has the authority to exclude individuals and entities that have engaged in fraud, abuse, and other types of misconduct from participation in Medicare, Medicaid, and other Federal health care programs. The effect of any exclusion is that no government-issued payment may be made for any items or services that are (1) furnished by an excluded individual or entity, or (2) directed or prescribed by an excluded provider. Any entity that hires or contracts with an individual or entity excluded by the OIG may also be subject to civil monetary penalties ("CMPs"). To avoid CMPs, the OIG recommends that health care entities screen new hires or contractors and current employees and contractors for exclusion on a monthly basis.

The New York State Office of Medicaid Inspector General (the "OMIG") also has the authority to exclude individuals and entities that have engaged in fraud, abuse or other types of misconduct from participation in the Medicaid program. Once excluded, these individuals and/or entities cannot offer services to Medicaid enrollees or be paid with Medicaid dollars.

Maimonides Health is committed to ensuring that all employees, contractors, volunteers, students, trustees, medical staff members, and others providing administrative or health care services relating to Federal and State health care programs with whom Maimonides Health does business are properly screened for exclusions and sanctions and are authorized to participate in Federal and State health care programs. Such screening will include monthly, and as required, ad-hoc monitoring of databases, including but not limited to, the OIG's List of Excluded Individuals and Entities (LEIE), System for Award Management (SAM), US Treasury Non-SDN OFAC Consolidated Sanctions, US Treasury SDN & Blocked Persons (SDN) and the New York Medicaid Exclusions List (the "Exclusion Lists"). Maimonides Health will not engage with, nor employ, any Ineligible Person.

II. SCOPE

This policy applies to all employees, contractors, volunteers, students, trustees, and medical staff members of Maimonides Health Resources, Inc. and its subsidiaries and affiliated entities, including, without limitation Maimonides Medical Center, Maimonides Midwood Community Hospital, Community Care of Brooklyn IPA, Inc., Brooklyn Communities Collaborative, Inc., MMC Holding of Brooklyn, Inc., Maimonides Research and Development Foundation, and M2 Medical Community Practice, P.C. and its affiliated captive entities (collectively "Maimonides Health" or "Maimonides").

III. DEFINITIONS

FDR: First Tier, Downstream and Related Entities, as such terms are defined by the Centers for Medicare & Medicaid Services.

Federal Health Care Programs: Any plan or program that provides health benefits, whether directly through insurance or otherwise, which is funded directly, in whole or in part, by the United States government. Federal Health Care Programs include, but are not limited to, Medicare, Medicaid, managed Medicare/Medicaid, Federal Employees Health Benefit Plan and TRICARE/CHAMPUS.

Ineligible Person: Any individual or entity, including any new or current employees, contractors, volunteers, students, trustees, and medical staff members, who: (i) is currently excluded, suspended, debarred or otherwise ineligible to participate in the Federal Health Care Programs; (ii) has been convicted of a criminal offense related to the provision of health care items or services and has not been reinstated in the Federal Health Care Programs after a period of exclusion, suspension, debarment, or ineligibility, or (iii) is listed on the SDN list.

Screened Person: All employees, contractors, volunteers, students, trustees, and medical staff members of Maimonides.

Specially Designated Nationals and Blocked Persons List (SDN list): The U.S. Treasury Department's Office of Foreign Assets Control (OFAC) exclusion list of individuals and companies (i) owned or controlled by, or acting on behalf of targeted countries and/or (ii) involved in terrorism, narcotics trafficking, or other activities that pose a threat to U.S. national security, foreign policy, or economy.

State Health Care Programs: Any plan or program that provides health benefits, whether directly, through insurance, or otherwise, which is funded directly, in whole or in part, by the State of New York. State Health Care Programs include, but are not limited to, New York Medicaid.

System for Award Management (SAM): The U.S. government database listing individuals, vendors, and suppliers prohibited from receiving Federal contracts or assistance.

IV. PROCEDURES

A. INITIAL SCREENING

1. The Procurement Department will screen contractors prior to entering into a contract, a purchase order, or consulting agreement and issuing a contractor number. Maimonides will not contract with or conduct any business with any contractor found to be an Ineligible Person. Documentation of all contractor screenings shall be kept by the Procurement Department for ten (10) years.

2. The Human Resources Department will screen all new hires prior to extending any offer of employment. Any job offer made prior to the completion of the screening shall be contingent upon the individual not being an Ineligible Person. Any applicant found

to be an Ineligible Person shall not be hired. Documentation of all pre-employment screening shall be kept by the Human Resources Department for ten (10) years.

3. The Credentialing Department will screen, including use of the National Practitioner Data Bank, all individuals who apply for privileges, apply for renewal of privileges, seek an extension or modification of privileges, and/or seek to change their supervising or collaborating physician status. In the event that an individual is found to be an Ineligible Person, the application for privileges or other action related to privileges shall be denied. The Credentialing Department shall immediately notify the Office of Corporate Compliance ("OCC") and the Office of Legal Affairs ("OLA") regarding any individual who is found to be an Ineligible Person. Documentation of such screening shall be kept by the Credentialing Department for ten (10) years.

4. The Volunteer Department will screen each new volunteer prior to finalizing their volunteer status. Any volunteer offer made prior to the completion of the screening shall be contingent upon the individual not being an Ineligible Person. Documentation of all pre-volunteer screening shall be kept by the Volunteers Department for ten (10) years.

5. The Executive Office and/or its designee will notify the OCC regarding all individuals who are proposed for membership on either the Maimonides Medical Center Board of Trustees or the Board of Trustees of its applicable affiliated entities. The OCC will conduct screening of such individuals prior to their appointment to the Board. Documentation of all such screenings shall be kept by the OCC for ten (10) years.

6. Following the initial screening conducted by the various departments mentioned above, each of these departments, along with other departments, including, but not limited to the Professional Affairs Department, Nursing (Travel and Agency Staff), Academic Affairs (Medical Students) and affiliated entities, including, without limitation, M2 Medical Community Practice, P.C. and its affiliated captive entities, shall submit a monthly list of applicable Screened Persons and/or active contractors to the OCC. Any Ineligible Person will be immediately removed from all activities that may, directly or indirectly, be billed to Federal and/or State-funded health care programs. The OCC will promptly notify the relevant business unit, Human Resources, OLA, and medical leadership regarding any such Ineligible Person. Any contractor identified as ineligible will be immediately deactivated for ordering and inactivated in the purchasing systems, with a note placed in the contractor comments field indicating their appearance on an Exclusion List. Additionally, any ineligible contractor will be removed from all activities that may, directly or indirectly, be billed to Federal and/or State-funded health care programs and will be terminated according to contractual provisions unless immediate removal would result in patient harm. The OCC will maintain documentation of these screenings for ten (10) years.

B. SUBSIDIARY & AFFILIATED ENTITY SCREENING

Maimonides shall also complete screenings for certain affiliates and subsidiaries, including Community Care of Brooklyn IPA, Inc., Brooklyn Communities Collaborative, Inc., M2 Medical Community Practice, P.C. and its affiliated captive entities, and entities for which it provides compliance services, including Southwest Brooklyn Health Home LLC (d/b/a Brooklyn Health Home). On a monthly basis, these entities shall submit to the OCC a list of applicable individuals and entities for the OCC and/or its designee to conduct monthly screenings against the Exclusion Lists.

Any individual found to be an Ineligible Person with respect to these entities will be immediately removed from all activities that may, directly or indirectly, be billed to Federal and/or State-funded health care programs. The OCC will immediately notify the applicable business unit, Human Resources, OLA and medical leadership regarding any such individual who is found to be an Ineligible Person. Documentation of the monthly screenings shall be kept by the OCC and/or the applicable entity for ten (10) years.

C. MEDICARE MANAGED CARE COMPLIANCE REQUIREMENT

All staff supporting Medicare Advantage Programs will be screened pursuant to Medicare Managed Care Manual Chapter 21 and Prescription Drug Benefit Manual Chapter 9 Section 50.6.8. Maimonides shall not use Federal funds to pay for services, equipment, or drugs prescribed or provided by a provider, supplier, employee or FDR excluded by OIG or SAM.

D. COMPLIANCE EXCLUSION SCREENING PROCESS

1. At the beginning of each month, OCC will send out an email to all known data owners, requesting that they forward their respective exclusion data files for screening. The files are generally received during the first week of the month. OCC will send a follow-up email to all known data owners as a reminder that the exclusion data files are due.

2. Upon receipt, OCC will review the exclusion data files for completeness and notify data owners if OCC needs any additional information. Once OCC verifies the format and data, OCC will send the files to Information Services Department for data scrubbing to remove duplicates and invalid information. Once the Information Services Department generates a ‘clean file’, OCC will upload the file to the screening contractor, which will then screen the list against appropriate databases.

3. Potential excluded individuals or entities that the screening contractor cannot clear will be referred back to OCC, which will instruct the data owner to research and work with OCC to ‘clear’ or ‘fail’ the individual/entity.

4. OCC will provide a monthly summary report to the applicable data owners.

5. OCC shall refer all failed items to the applicable department/entity, and as necessary to OLA, Credentialing, and/or Human Resources for final disposition.

E. RESPONSIBILITIES OF SCREENED PERSON

1. All Screened Persons are required to disclose immediately to their manager, the Chief Compliance Officer ("CCO") and OLA any debarment, exclusion, suspension or other event that makes that person or entity an Ineligible Person.

2. Anyone who receives actual notice through a screening process or other means that a Screened Person has become an Ineligible Person shall immediately notify the OCC. The OCC shall coordinate with the affected Maimonides unit or related entity to: (1) notify the Ineligible Person; (2) remove such Ineligible Person from responsibility for, or involvement in, the provision of services or business operations related to any Federal and/or State-funded health care programs; and (3) remove such Ineligible Person from any position for which that person's compensation or the items or services furnished, ordered, or prescribed by the Ineligible Person are paid in whole or part, directly or indirectly, by Federal and/or State-funded health care programs.

3. Anyone who has actual notice that a Screened Person is charged with a criminal offense that falls within the ambit of 42 U.S.C. § 1320a-7(a) (referencing mandatory exclusions) or 42 U.S. §§ 1320a-7(b)(1)-(3) (referencing permissive exclusions), or is proposed for exclusion during their employment or contract term, or, in the case of a credentialed individual, during the term of that individual's medical staff privileges, shall immediately notify the OCC. The OCC shall coordinate with the affected department or related entity to ensure that the responsibilities of that Screened Person have not and shall not adversely affect: (a) the quality of care rendered to any beneficiary, patient, or resident; or (b) the accuracy of any claims submitted retrospectively or prospectively to any Federal and/or State-funded health care programs. This may include suspension, termination, termination of the contract, or other actions as authorized by Maimonides or the related entity's policies, Medical Staff By-laws or Corporate By-laws.

4. Failure of Screened Persons to comply with provisions under this Policy may result in disciplinary action up to and including suspension or termination, termination of the contract, or other actions as authorized by Maimonides policies, Medical Staff By-laws or Corporate By-Laws.

5. If the Screened Person denies any material findings contained in the background screening results, OCC shall be notified and shall initiate further investigation. The Screened Person may provide documentation indicating that the Screened Person is not excluded or that reinstatement has been granted. The Screened Person may also submit a sworn affidavit that the Screened Person is not the Ineligible Person who appears on the Exclusion Lists. Human Resources, Medical Staff Services or other responsible department shall forward the documentation to the OCC for evaluation and input. After

the additional investigation is completed, the OCC or related entity will provide a response to the Screened Person within a reasonable period of time.

F. CORRECTIVE ACTION AND REPAYMENT OF INELIGIBLE PERSON'S ITEMS AND SERVICES

1. Departments and/or Entities for which the Ineligible Person has provided any services shall inform the CCO or a designee of the details of any potential compliance issues associated with the Ineligible Person.

2. The CCO or his/her designee shall develop a corrective action plan and notify OLA. Where applicable, the OCC will notify the Finance Department ("Finance") or the related entity regarding the Ineligible Person. Finance or the related entity shall determine whether any services provided by the Ineligible Person had been billed to any Federal or State funded health care programs since the date of the exclusion of the Ineligible Person and/or whether the Ineligible Person impacted Maimonides' cost reporting obligations. If Finance determines that any payments for items or services rendered by the Ineligible Person have been received from any Federal and/or State-funded health care programs since the date of exclusion, the payment(s) shall be refunded to the payer. Bills that have not yet been submitted for such items or services shall not be submitted for payment. Cost reports shall be adjusted as necessary by Finance.

G. RECORD RETENTION

All documents pertaining to Screened Persons shall be maintained for ten (10) years.

V. CONTROLS

The Office of Corporate Compliance ("OCC") is responsible for overseeing and monitoring compliance with this Policy, including conducting exclusion and sanction screenings, maintaining required documentation, and reporting issues to appropriate leadership. In collaboration with Human Resources, Legal Affairs, Finance, Credentialing, and operational departments, the OCC also oversees investigations, corrective actions, repayment obligations, and other required reporting and compliance activities.

Department leaders, Human Resources, Procurement, Credentialing, Volunteer Services, Professional Affairs, Academic Affairs, affiliated entities, and other designated data owners are responsible for complying with the screening requirements described in this Policy, providing accurate and timely screening data to the OCC, and taking appropriate corrective action when an Ineligible Person is identified.

REFERENCES:

OIG General Compliance Program Guidance (November 2023)
OIG Special Advisory Bulletin on the Effect of Exclusion from Participation in Federal Health Care Programs (September 30, 1999 and May 9, 2013)
CMS Medicare Managed Care Manual, Chapter 21
CMS Prescription Drug Benefit Manual, Chapter 9, Section 50.6.8
OIG Supplemental Compliance Guidance for Hospitals (January 31, 2005)
42 U.S.C. §§1320a-7(a) and 1320a-7(b)(1)-(3)
OMIG Compliance Program Required Provider Duties
18 NYCRR §521.3(a), (b)
18 NYCRR §§504.7(b)-(h), 515.3 and 515.7
42 CFR §1001.1901(a)-(c)(2)
Executive Order 13224 – Blocking Property and Prohibiting Transactions with Persons Who Commit, Threaten to Commit, or Support Terrorism; 31 CFR Part 596
HR-004 Employee Recruitment and Selection

INDEX: Sanctions, Exclusion, Screening

DEPARTMENT RESPONSIBLE: Corporate Compliance

ATTACHMENTS: None