

Policy Board Meeting Minutes Monday, June 26, 2023

Meeting Location: In-Person Meeting; Held in Burnham Brook Boardroom, Second Floor

Members Present: Lyn Briel, Jim Baldwin, Corally O'Dell, Barbara Frederick, Jose Orozco, Jr., Sherii

Sherban, Deana Spencer, Thomas Unger, Linda Whitfield

Members Absent: Steve Marzolf, Allen Byam

Staff Present: Jodi DeJonge, John Gelletich, Amber Logsdon, Paulette Porter, Vera Prince, Stacy Wines,

Glin Winsor

Staff Absent: Karen Courtney

Guests Present: Helen Guzzo, Calhoun County Senior Services

I. Call to Order and Approval of Action Items

In absence of the Chair, Marzolf, Briel called the meeting to order at 5:32 pm. Quorum met for this meeting.

A. Approval of Consent of June 26, 2023, Policy Board Agenda, March 27, 2023, Policy Board Meeting Minutes, and May 22, 2023, Public Hearing / Advisory Council and Policy Board Joint Meeting Minutes

Motion to approve Consent June 26, 2023, Policy Board Agenda, March 27, 2023, Policy Board Meeting Minutes, and May 26, 2023, Public Hearing / Advisory Council and Policy Board Joint Meeting Minutes, supported by Baldwin; seconded by Unger. Motion: CARRIED.

II. Public Comment/Open Meeting

Helen Guzzo of Calhoun County Senior Services expressed appreciation to CareWell for support and sponsorship for the 2023 Calhoun County Senior Expo held at the Kellogg Area on May 18. 745 Seniors attended, including participation of 106 vendors. Guzzo also noted the upcoming Centenarian Celebration on July 21, 2023, from 4:00 pm – 7:00 pm at the Marshall United Methodist Church.

III. CEO Report

Wines reported she will be serving on the Area Agencies on Aging Association 4AM Human Resources Advisory Committee. Many from the Area Agencies on Aging have also expressed issues regarding the challenge of retaining employees, which the committee will review and

discuss best practices for their organizations. Also noted, Paulette Porter will serve on the Advisory Council work group to review standards relating to the Advisory Council.

CareWell is continuing to work on the budget involving direct care worker wages, caregiver resource center, home and community care services and long-term care ombudsman. The Agency has also experienced an increase in funding for meals, including the aspects of transport (e.g., gas, vehicle maintenance).

Additional CEO reporting highlights included the following:

- Wines presented CareWell's Annual Implementation Plan (AIP) for 2023-2024 to
 members of the Barry County Commission on Aging Board on June 21, 2023. Wines
 will make the final revisions prior to submitting the Plan to the state next week and will
 present the final Plan to the State Commission in August.
- CareWell's contract with Meridian will end on December 31, 2023. CareWell will not renew its contract with Meridian.
- To-date, CareWell has reached over 2,500 community members with outreach presentations.
- The Agency received 250 Senior Project Fresh booklets for distribution this year. After distributing to targeted locations in Calhoun and Barry Counties, only approximately 40 remain for distribution.
- The in-person Diabetes PATH workshop has started at the Kool Center; nine have registered to attend this workshop. The next workshop begins August 24 at the Forks Senior Center in Albion.
- To-date, three staff members are completing training in Powerful Tools for Caregivers and two are completing training/certification for the Michigan Medicare/Medicaid Assistance Program (MMAP).

IV. Policy Board Committee Reports

A. Executive/Personnel Membership Committee

1. Executive Committee Report Out on the Off-site Board Retreat

The Board's Executive Committee met on Saturday, June 3, 2023, in South Haven for an annual Board Retreat. The committee reviewed effective Board models and types, reiterated its mission to the Agency, strategized the implementation of the Board's bylaws, and received an update on action items of CareWell's Strategic Plan. Also noted, due to no scheduled Board meeting in July, the Executive Committee will meet off-site in July or August prior to the next Policy Board meeting on August 28, 2023.

2. Attorney-Approved Bylaws

Wines reiterated the Chair's goal of the Board to read the bylaws in detail and return in August for discussion at the next Board meeting. Briel and the Board outlined the first portions for discussion in August are Articles 1-3. Also noted, new Board members are welcome to ask questions as needed.

B. Finance/Audit Committee

1. Financial Statements for Months Ending May 31, 2023

Winsor reported on Financials through May 31, 2023, noting the Finance Committee did not meet prior to the Board meeting; however, there are no changes since previous reporting at the Public Hearing Joint Meeting held on May 22, 2023. Winsor reported the \$55,000 interest from Honor Credit Union, which accrued from CareWell's CD investments. Also noted, Waiver expenses will not decrease due to the impact of the waiting list; however, as the wait list reduces, the Agency will start to see an increase in revenue for Waiver.

Motion for approval of the Financial Statements for months ending May 31, 2023, supported by Baldwin; seconded by Sherban. Motion: CARRIED.

C. Compliance, Quality, Waiver Report

1. Waiver Report

DeJonge reported on the Waiver Report, which included data pulled through June 20, 2023. Data collected reflected a total number of 446 participants currently in the Waiver program and a total number of 210 on the waiting list. DeJonge also noted that CareWell is continuing to build teams that will be able to perform assessments—noting another team will be available by the end of July. DeJonge added a portion of the waiting period involves the Agency waiting for information requested from potential participants seeking assistance (e.g., verification/proof of income).

2. MI Choice Waiver - Successes, Goals and Strategies Presentation

Porter presented a presentation on Successes, Goals and Strategies of the MI Choice Waiver Program. Porter provided copies of the presentation, including a description of acronyms for the Board as reference.

Brief highlights of achievements and goals:

- Created Clinical Director position, currently held by Amber Logsdon.
- ✓ Hired new Outreach/Marketing Coordinator position, currently held by Cassandra Lucas-Moore.
- ✓ Increased marketing initiatives to reflect CareWell as a preferred place to work.
- ✓ Continued hiring of Nurse and Social Work Support Coordinators to meet agency's full capacity of 13.
- Contractual agreement with Training Coordinator to create modules and forms for Care Management teams.
- ✓ Full implementation of the Enrollment Assessment.
- ✓ Increased number of MI Choice Waiver enrollments.

D. Advocacy and Outreach Updates

1. Outreach Activities

Board members received copies of CareWell's Programming Outreach Report and July activity calendars for each of the senior centers as reference. Activities and attendance for Heritage Commons in Marshall and the Forks Senior Center in Albion continue to thrive.

In addition to the promotion and distribution of coupons for the Senior Project FRESH project, outreach activities included presence at Juneteenth celebration in Albion and Battle Creek on June 17 and a Health & Safety Expo in Albion on June 24.

Also reported, Heritage Commons Senior Enrichment Center will have its one-year anniversary celebration on Thursday, July 27, 2023, at 4:00 pm – 6:00 pm. In addition to presentations, live music and complimentary carriage rides, the center will also unveil the new donor tree. CareWell will send invitations to community partners and supporters this week.

2. Advocacy Information

Porter noted she continues to monitor the Federal and State legislation sites every week for issues relating to seniors. She will continue to forward information to council members, as well as letter templates for members to participate in advocacy for the region. In addition, CareWell provided copies of the updated 2023 USAging Policies booklets to Board members for their reference.

3. Michigan Senior Advocates Council

O'Dell reported the Senior Advocates Council will meet on Wednesday, June 28, 2023. She will report on the details from the meeting at CareWell's next Policy Board meeting in August.

V. Adjournment

Motion for Policy Board to adjourn supported by Sherban; seconded by Baldwin. With no additional items to discuss, the meeting adjourned at 7:01 pm.

Respectfully submitted,

Vera Prince, Recording Secretary for Nancy Mullett, Policy Board Secretary

CareWell Services CEO Report August 2023

Areas Agencies on Aging Association (4am)

The 4am Annual Conference will be held November 7 & 8, in Lansing. This year the format will be 100% in person. It was too costly to do the hybrid format again this year. The Planning Committee is looking for sponsorships. If you think your organization would be interested, please let me know and I will share the information with you. Sponsorship levels range from \$750 to \$2,500.

Michigan Department of Health & Human Services (MDHHS) Behavioral and Physical Health and Aging Services Administration (BPHASA)

The Annual Implementation Plan has been submitted. CareWell is slated to present before the Commission on Services to the Aging on September 15.

The Annual Assessment of CareWell was conducted by our field representative, Annette Gamez. As of the writing of this report, I have not received the official notice of her findings. She did inform me we will get a finding regarding not having the Annual Report completed. We had the narrative, programming and service details, but did not have the financial portion, which is taken from our 990.

Senior Centers

Heritage Commons Senior Enrichment Center:

July's attendance: 1,063 Total membership: 386

Forks Senior Center: July's attendance: 820 Total membership: 390

Information specific to both senior centers will be available at the board meeting.

Staffing Updates

While we have come a long way, we are still short of filling positions for nursing and social work. Ongoing recruitment continues. The new staff we have are an excellent addition to the team. I love the energy they bring along with their innovative ideas.

Vera accepted another position better suited for her and her long-term goals. Her last day was Wednesday, August 9. She was a great asset and will be missed.

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USAging Conference

The conference was held July 15-19 in Salt Lake City. I attended with Karen Courtney and Paulette Porter. USAging outdid themselves this year for their 48th Annual Conference. It was a great time to network and learn from government experts, policymakers, business leaders and other aging practitioners and partners. We shared knowledge and discussed new directions in the field of aging. The sessions covered a wide array of issues on aging. I noticed this year there was a big emphasis on how the nation is not prepared to adequately address the needs of the aging population as it continues to grow at a record-breaking rate. The message was spun though; rather than being alarmed by the news, act now to plan accordingly. I also appreciated how many sessions they had for dealing with the needs of the caregiver and forming and engaging networks for health care contracting. It was nice that USAging took into consideration how the direct care workforce and staffing shortages for nurses and social workers are affecting AAAs. I took advantage of a couple of the sessions on brainstorming how to attract and keep employees. The conference ended with Pam Curtis, CEO of Senior Resources of West Michigan, as she accepted her new role as the president of USAing. Since I have been at CareWell, this was by far the most interesting conference I have attended. Maybe it is because I'm looking through a different lens now, I'm not sure. Karen and Paulette found it very beneficial in their work as well.

Amended and Restated Bylaws of Region 3B Area Agency on Aging, d/b/a CareWell Services Southwest

Dated: May 27, 2023

ARTICLE I: Identity, Scope and Offices

- 1.1 Name: The name of the Corporation shall be Region 3B Area Agency on Aging, d/b/a CareWell Services Southwest.
- The Corporation: The Corporation (the "Corporation") is a Michigan nonprofit corporation under the laws of the State of Michigan and recognized by the State of Michigan as a nonprofit corporation and shall operate to qualify for exemption from federal and state income taxes under Section 501(c)(3) of the Internal Revenue Code of the United States. The purposes of the Corporation are set forth in its Articles of Incorporation and stated in (1.4).
- 1.3 Restated Bylaws: The Restated Bylaws completely amend and restate the original Bylaws and any amended Bylaws thereafter. The restated Bylaws govern the regulation and management of the affairs of the Corporation, subject to any inconsistent provisions of applicable law and the Corporation's Articles of Incorporation.
- 1.4 Statement of Purpose: The purpose of the Corporation is to assume leadership for advocacy for elder issues; to advocate for individual elders; to assist in preventing unnecessary institutionalizing of the elderly; to plan and participate in a coordinated service delivery network; to develop older adult programs; to implement the Older Americans Act and the Older Michiganians Act; to provide for monitoring, assessment and periodic evaluations of activities and projects in the field of aging; to assure the availability of information and referral sources so that all older persons will have reasonably convenient access to such sources; to acquire and allocate funds from other sources and contract with or purchase from viable agencies for services to the elderly consistent with the agency's objectives; to acquire, to own, to dispose of, and to deal with real and personal property and interest therein, and to apply gifts, grants, bequests and devises, and the proceeds thereof in furtherance of the purposes of the Corporation; to provide for the mutual support and advancement of the causes of elderly and retired persons, including through events such as fundraisers and raffles in accordance with applicable laws; to conduct activities, either directly, through related organizations, or in cooperation with organizations exempt from tax conduct activities, either directly, through related organizations, or in cooperation with organizations exempt from tax; to do such other things and perform such acts as the Board of Directors may determine to be appropriate or incidental to its purposes and as are not forbidden by the powers conferred on nonprofit corporations by the laws of the State of Michigan.
- 1.5 <u>Powers:</u> Except where limited by the Corporation's Articles of Incorporation, the Corporation shall have and exercise such powers in furtherance of its purposes or may



hereafter be granted by the Michigan Nonprofit Corporation Act, PA 162 of 1982, as amended from time to time ("the Act") and any other applicable laws governing an area agency on aging.

1.6 Office: The principal office of the Corporation is located at the 200 W. Michigan Avenue, Suite 102, Battle Creek, Michigan. The Corporation may from time to time establish such other offices as the Board of Directors may designate or as the affairs of the Corporation may require.

ARTICLE II: Members

There shall be no members.

ARTICLE III: Board of Directors

- 3.1 <u>Powers:</u> The business, property and affairs of the Corporation shall be managed under the direction of the Board of Directors.
- General Powers: All business and affairs of the Corporation shall be managed by the Board of Directors. The Board of Directors shall make appropriate delegations of authority to the Officers of the Corporation or to one or more individuals employed by the Corporation. To the extent permitted by law, the Board of Directors may, by resolution adopted by a majority of its directors, authorize one or more Board committees to act on its behalf.

3.3 <u>Number; Qualifications; Election:</u>

- A. The Directors of the Corporation shall consist of representation from Barry and Calhoun Counties, generally proportional to the 60+ population and consistent with the regulations of the Bureau of Aging, Community Living and Supports, ACLS Bureau and the Michigan Department of Health and Human Services. There shall be no less than twelve (12) and no more than eighteen (18) Directors, with as reasonably as possible directorships divide between the counties based on current demographics. Any change in the counties Directors shall be achieved as Directors terms expire.
- B. The Chief Executive Officer shall solicit Director nominations from the current Directors representing each of the two counties and may suggest candidates from both counties, including any candidate for which a county commission designation was not received. The Directors from each of the counties shall endeavor to reach consensus on the Director nominee(s) from their respective counties.
- C. The Board may by resolution form a nominating committee to assist in the development and selection of Director nominees. The Chief Executive Officer shall be a voting member of any nominating committee.

- D. Directors shall be elected at each Annual Meeting by simple majority vote of the Directors present at the meeting.
- E. Each person serving as a Director or committee member shall be deemed to have consented to and authorized the giving and receipt of notices and communications by electronic transmission and shall confirm such fact in writing if and when requested by the Corporation. Upon election, each Director and committee member shall provide to the Corporation's Secretary/Treasurer his/her/their addresses for the receipt of notices and communications by personal delivery, mail, and electronic transmission.
- Term of Office: Directors shall be appointed for a term of three (3) years with a limit of two consecutive terms, except in the event of their earlier resignation, removal, death or incapacity or until their successors are appointed and have qualified. A Director is eligible for reappointment after one year off the Board following two consecutive terms. Directors shall serve from October 1 through September 30 of each year for three years and shall be reappointed to a second term if able and willing to serve. Directors fulfilling unexpected vacancies will be eligible for two full consecutive terms in addition to completing the term of the vacancy.

3.5 <u>Resignation; Removal; Vacancies:</u>

- A. A Director may resign by written notice to the Corporation. The resignation will be effective upon its receipt by the Corporation, or a subsequent time as set forth in the notice of resignation.
- B. By a simple majority vote of the Directors then in office, a director may be removed with cause. The Director proposed for removal shall be given written notice summarizing the cause for removal and an opportunity to address the Board prior to its vote on the question of removal.
- C. The Chief Executive Officer shall solicit Director nominations for any mid-term Director vacancy from the current Directors representing the same county as the vacated Directorship and may suggest candidates. The Directors from that county shall endeavor to reach consensus on the replacement Director, and the replacement Director shall be elected by vote of the current Board to serve the remainder of the term of the vacant Directorship.
- 3.6 <u>Conduct of the Meeting:</u> Meetings of the Board of Directors will be presided over by the Chairperson, and in his/her/their absence, by the Vice Chairperson. The Secretary/Treasurer of the Corporation shall serve as secretary for the meeting, and in his/her/their absence, another person chosen at the meeting will act as secretary of the meeting.
- 3.7 <u>Meetings:</u> All meetings of the Board of Directors must be open to the public and must be held in a place available to the public. A meeting of the Board of Directors shall not

be held unless public notice is given as provided in the Michigan's Open Meetings Act, 1976 PA 267, MCL 15.261-15.275 (the "OMA"), and meetings of the Board of Directors shall comply with the OMA.

At the Annual Meeting, the Board of Directors shall establish, by resolution and vote, an annual calendar for regular meetings. The calendar will be published and notice thereof given to each Director. The Annual Meeting of the Directors will be held at the principal office of the Corporation, or any other place and date designated by the Executive Committee in September of each year to elect Directors, to receive the audit reports of the Corporation, and to conduct such other business as may properly come before the meeting. In addition to the Annual Meeting, at least five (5) regular meetings of the Board of Directors shall be held each year on such dates and at such times that are determined by the Board for the purpose of conducting business as may come before the Board.

Notice of the Annual Meeting and regular meetings stating the date, time and place of the meeting shall be given to each Director by personal delivery, email or first-class mail at least seven (7) days before the meeting, or by electronic transmission at least three (3) days before the meeting. The notice of a regular meeting does not need to state the purposes or purposes or the business to be transacted. All meetings of the Board of Directors shall be conducted in conformance with the OMA.

- Special Meetings: Special meetings of the Board of Directors shall be called by the Chairperson or upon written request of any three (3) members of the Board stating the purpose of the meeting. The Chairperson shall fix the date, time and place of a special meeting. Notice of the special meeting stating the purpose as well as the date, time and place shall be given to each Director as least 24 hours prior to the special meeting. The Board shall post notice of the special meeting at least 18 hours before the meeting in a prominent and conspicuous place at both the public body's principal office and, if the public body directly or indirectly maintains an official internet presence the notice must be posted on the website that is fully accessible to the public. All special meetings of the Board of Directors shall be conducted in conformance with the OMA.
- 3.9 <u>Closed Sessions:</u> The Board of Directors may enter closed session under the rules set out by the OMA.
- 3.10 <u>Effect of Attendance:</u> A Director's attendance at or participation in any annual, regular or special meeting waives any required notice to him/her/them of the meeting unless they/he/she at the beginning of the meeting, or when they/he/she arrives, objects to the meeting or the transacting of business at the meeting and after objecting does not vote for or assent to any action taken at the meeting.
- 3.11 <u>Continued Absences:</u> A Director who fails to attend three (3) consecutive meetings of the Board without notice to the Chief Executive Officer or the Secretary of the Board shall be deemed to have resigned from the Board. The resulting vacancy shall be filled in accordance with subsection 3.5.C.

- Ouorum: A majority of Directors in office from time to time shall constitute a quorum for the transaction of business at a meeting of the Board. If less than a quorum is present at a meeting, a majority of the Directors present may adjourn the meeting from time to time without further notice other than announcement at the meeting until a quorum is present. The Directors in attendance may also receive reports and comments from the public or staff, ask questions, and comment on matters of interest. A Director cannot vote or act by proxy at any meeting of the Directors.
- 3.13 <u>Voting:</u> Each Director shall be entitled to one vote. The vote of the majority of the Directors present at a meeting at which a quorum is present shall be the act of the Board, unless otherwise provided by these Restated Bylaws. All voting must be conducted during a meeting open to the public in accordance with the OMA.
- 3.14 <u>Compensation:</u> Directors shall not receive compensation for their services as such, but they may be reimbursed for the reasonable expenses they incur for attendance at Board or committee meetings.
- Participation by Telephonic or Remote Communication: Provided that all the conditions below are met, a Director may participate in, and vote at, any Board or committee meeting by means of a telephone conference or other remote communication technology and shall be deemed present at the meeting. Each person participating by remote communication technology:
 - (a) Must either be on active military duty or have a medical condition for which remote communication technology serves as an adequate accommodation to fully participate in meetings as a Director or qualify for remote participation under another provision of the OMA;
 - (b) Must be identified to all participants in the meeting as participating by remote communication technology and reasonably verified to be a Director or committee member; and
 - (c) Must have a reasonable opportunity to participate in the meeting and to vote on matters submitted to a vote, including an opportunity to read or hear the proceedings of the meeting substantially concurrently with the proceedings, and an opportunity to communicate with the other participants.

The Corporation shall maintain minutes or other record of all votes and other action taken by persons participating in the meeting by remote communication technology.

Revocation of Authorization: No authorization, assignment, referral or delegation of authority by the Board of Directors to any committee, Officer or agent shall preclude the Board from exercising the authority required to meet its responsibility for conduct of the Corporation. The Board shall retain the right to rescind any such authorization, assignment, referral or delegation.

ATTACHMENT D FINANCIAL REPORTS TO BE EMAILED LATER THIS WEEK

Attachment E



WAIVER

Waiver	Demographics -	Data	pulled	on 8.15.23
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	# of Parts	American Indian or Alaskan Native	Asian	Black or African American	White or Caucasian	Hispanic or Latino	Native Hawaiian or other Pacific Islander	Client Refused	Female	Male
BARRY	41	0	0	0	40	1	0	0	30	11
BERRIEN	78	0	0	20	56	1	0	1	52	26
BRANCH	18	0	1	0	16	0	0	1	10	
CALHOUN	189	0	10	47	122	4	0			8
CASS	6	0	0	2				6	136	53
KALAMAZOO		_			4	0	0	0	5	1
	73	1	1	12	57	1	0	3	43	30
ST. JOSEPH	25	0	1	2	20	1	0	1	13	12
VAN BUREN	27	0	0	2	20	3	0	2		
TOTALS	457	1	13	85					18	9
8	.57		13	65	335	11	0	14	307	150

Medicaid/Intake Waitlist - as of 8.14.23 -CAREWELL ONLY

	PSA 3 (Barry, Branch, Calhoun, Kalamazoo, St. Joseph	PSA 4 (Berrien, Cass, Vanburen)	Total on Wait List
EA Completed	10	A.	
EA Pending	8	1	14
Financially			9
Questionable - IN			
PROCESS WITH			
MA DEPT	_ 12	2	14
Wait List	144	13	157
No Contact Letter	1	0	157
TOTAL ON WAIT			
LIST	175	20	195

CLOSURES TO	DATE
Moved Out of	
Service Area	12
Refused Services	3
NH Placement	28
Transferred to	
PACE	3
Chose DHS Home	
Help	3
Hospice	
Residence	3
Death	48
TOTAL	100

REGION 3B AREA AGENCY ON AGING



PROMOTING HEALTH - INDEPENDENCE - CHOICE

Code of Ethics and Business Conduct

Statement of Our Core Values

Mission

Promoting health, independence, and choice for seniors, persons with disabilities, and caregivers.

Agency Vision

A community where people are cared for with dignity and respect.

Values

Integrity, quality, commitment, financial responsibility, and advocacy.

Build Trust and Credibility

Our Agency's success depends on the trust and confidence we earn from our employees, participants, and community partners. We gain credibility by adhering to our commitments, displaying honesty and integrity, and reaching Agency goals solely through honorable conduct. It is easy to say what we must do, but the proof is in our actions. Ultimately, we will be judged on what we do.

When considering any action, it is wise to ask: Will this build trust and credibility for CareWell Services? Will it help create a working environment where CareWell Services can succeed over the long term? Is the commitment I am making one I can follow through with? We will only maximize trust and credibility by answering "yes" to those questions and working daily to build our confidence and credibility.

Respect for the Individual

We all deserve to work in an environment where we are treated with dignity and respect. CareWell Services (CWS) is committed to creating such an environment because it brings out the full potential in each of us, which, in turn, contributes directly to our business success. Unfortunately, we cannot afford to let anyone's talents go to waste.

We embrace and encourage our employees' differences on the basis of race, national origin, color, sex, disability, religion, age, height, weight, familial status, partisan considerations, or genetic information. Sexbased discrimination includes, but is not limited to, discrimination based on sexual orientation, gender identity, gender expression, sex characteristics, and pregnancy.

CWS is an equal employment/affirmative action employer committed to providing a workplace free of discrimination from abusive, offensive, or harassing behavior. Employees who feel harassed or discriminated against should report the incident to their manager or Human Resources.

All CWS' employees are also expected to support an inclusive workplace by adhering to the following conduct standards:

- 1. Treat others with dignity and respect at all times.
- 2. Address and report inappropriate behavior and comments that are discriminatory, harassing, abusive, offensive, or unwelcome.
- 3. Foster teamwork and employee participation, encouraging the representation of different employee perspectives.
- 4. Seek insights from employees with different experiences, perspectives, and backgrounds.
- 5. Avoid slang or idioms that might not translate across cultures.
- 6. Support flexible work arrangements for co-workers with different needs, abilities, and obligations.
- 7. Confront the decisions or behaviors of others that are based on conscious or unconscious biases.
- 8. Be open-minded and listen when given constructive feedback regarding others' perceptions of your conduct.

9. CWS will not tolerate discrimination, harassment, or any behavior or language that is abusive, offensive, or unwelcome.

Create a Culture of Open and Honest Communication

At CWS, everyone should feel comfortable speaking their mind, particularly concerning ethics concerns. Managers are responsible for creating an open and supportive environment where employees feel comfortable raising such questions. However, we all benefit tremendously when employees exercise their power to prevent mistakes or wrongdoing by asking the right questions at the correct times.

CWS will investigate all reported instances of questionable or unethical behavior. The Agency will take appropriate action in every instance where improper conduct is found to have occurred. Therefore, we will not tolerate retaliation against employees who raise genuine ethical concerns in good faith.

For your information, CWS' whistleblower policy is as follows:

Whistleblower Policy:

All CWS' employees must report, either verbally or in writing, to their immediate manager or alternate line of authority as described below, all evidence of activity by a CWS' department, employee, board member, or trustee that the employee believes may constitute:

- 1. Fraud
- 2. Unethical business conduct
- 3. A violation of state or federal law
- 4. Substantial and specific danger to an employee's health or the public's health and safety
- 5. Misuse of CWS funds

Any CWS employee who reports such incidents as described above in good faith shall not be retaliated against for making the report. This includes protection from having the employee's compensation or terms and conditions of employment adversely impacted by the disclosure of such statements. In addition, no employee may be adversely affected because the employee refused to carry out a directive that constitutes fraud or violates state or federal law.

Employees should report evidence of alleged improper activity to their immediate manager or an executive officer. For example, suppose the employee is dissatisfied with the manager or executive officer's response or is uncomfortable reporting such concerns to the manager or executive officer for any reason. In that case, the employee should report the matter to the CEO.

If the employee is not satisfied with the response from the CEO, the employee should contact the Chair of the Policy Board of Directors. When reporting an issue, employees should provide as much specific information as possible, including names, dates, places, and events that took place, the employee's perception of why the incident(s) may be a violation, and what action the employee recommends be taken. Anonymous written or telephonic communications will be accepted, including e-mails. However, CWS' ability to investigate such reports could be hampered by anonymity. Employees who choose to identify themselves will generally receive a reply to their message within 20 working days or as soon as practicable after that.

In the first instance, employees are encouraged to address such issues with their managers or HR Department, as most problems can be resolved swiftly. If, for any reason, that is impossible, or an employee is uncomfortable raising the issue with their manager. The Human Resources Department and Chief Financial/Compliance Officer have an open-door policy.

Set Tone at the Top

Management has the added responsibility of demonstrating, through their actions, the importance of this Code. In any business, ethical behavior does not simply happen; it is the product of clear and direct communication of behavioral expectations, modeled from the top and demonstrated by example. But, again, ultimately, our actions are what matters.

To make our Code work, managers must be responsible for promptly addressing ethical questions or concerns raised by employees and for taking the appropriate steps to deal with such issues. Managers should not consider employees' ethics concerns as threats or challenges to their authority but rather as another encouraged form of business communication. At CWS, we want the ethics dialogue to become a natural part of daily work.

Uphold the Law

CWS' commitment to integrity begins with complying with laws, rules, and regulations where we do business. Further, each of us must understand the Agency policies, laws, rules, and regulations that apply to our specific roles. If we are unsure whether a contemplated action is permitted by law or CWS' policy, we should seek advice from the resource expert. Finally, we are responsible for preventing law violations and speaking up if we see possible violations.

Responding to Detected Offenses

The Chief Compliance Officer will review and assess all allegations of potential wrongdoing that arise from hotline reports, employee communications, or audits conducted by the Agency. Initial assessments are made to determine if there is a need to involve legal counsel to advise or direct the process and the need for the privilege to protect the process. During this time, an assessment is made to determine the appropriate resources required to conduct an initial investigation, using legal counsel when warranted. Executive management is immediately notified if a severe offense allegation appears valid. Additional resources may be required to investigate a non-compliant situation thoroughly if warranted. Records of an investigation may include the following:

- 1. Documentation of the alleged violation.
- 2. A description of the investigation process.
- 3. Copies of the interview notes and key documents about the allegation.
- 4. A log of the witnesses interviewed, and the documents reviewed.
- 5. The results of the investigation.

If the investigation indicates that a violation has occurred, the appropriate corrective action will take place that includes the following:

- 1. Prompt return of any overpayments.
- 2. Notifications to the appropriate government agency.
- 3. Review of the current policies and procedures.
- 4. Modification of any electronic systems.
- 5. Referral to criminal or law enforcement authorities.
- 6. Possible disciplinary action of involved employee(s), including termination if warranted.

Unless prior written approval is obtained from MDHHS-OIG, CWS will not seek to contact the subject of the investigation about any matters related to the investigation; enter or attempt to negotiate any settlement or agreement regarding the incident; or accept any monetary or another thing of valuable consideration by the subject of the investigation connection.

Credentialing, Termination, and Payment Suspension

CWS will not have affiliation with debarred or suspended providers or persons with employment, consulting, or any other contractual agreement with a debarred or suspended person or entity for the provision of items or services covered by MDHHS-OIG.

CWS is prohibited from paying with funds received under contract for goods and services furnished by an excluded person or provider, at the direction or on the prescription of an excluded person or provider. (Social Security Act (SSA) section 1903(i)(2) of the Act; 42 § § 455.144,42 CFR § § 455.106, and 42CFR § § 1001.1901(b)).

Proprietary Information

We will not engage in the unauthorized use, copying, distribution, or alteration of software or other intellectual property.

Selective Disclosure

We will not selectively disclose (whether in one-on-one or small discussions, meetings, presentations, proposals, or otherwise) any material nonpublic information concerning CWS, its securities, business operations, plans, financial condition, results of operations, or any development plan. In addition, we should be particularly vigilant when making presentations or proposals to participants to ensure that our presentations do not contain material nonpublic information.

Health and Safety

CWS is dedicated to maintaining a healthy environment. A safety manual has been designed to educate you on safety in the workplace. Please see the HR Department if you do not have a copy of this manual.

Avoid Conflicts of Interest

Conflicts of Interest

We must avoid any relationship or activity that might impair or even appear to impair our ability to make objective and fair decisions when performing our jobs. At times, we may be faced with situations where the business actions we take on behalf of CWS may conflict with our personal or family interests. We owe a duty to CWS to advance its legitimate interests when the opportunity arises. We must never use CWS property or information for personal gain or take for ourselves any opportunity discovered through our position with CareWell Services.

Here are some other ways in which conflicts of interest could arise:

- 1. Being employed (you or a close family member) by, or acting as a consultant to, a competitor or potential competitor, supplier, or contractor, regardless of the nature of the employment, while employed with CareWell Services.
- 2. Hiring or supervising family members or closely related persons.
- 3. Serving as a board member for an outside commercial agency or organization.
- 4. Owning or having a substantial interest in a competitor, supplier, or contractor.
- 5. Having a personal interest, financial interest, or potential gain in any CWS transaction.
- 6. Awarding Agency business with a firm owned or controlled by a CWS employee or their family.
- 7. Accepting gifts, discounts, favors, or services from a participant/potential participant, competitor, or supplier unless equally available to all CWS employees.

Determining whether a conflict of interest exists can be challenging to do. Employees with a conflict-of-interest question should seek advice from management. However, before engaging in any activity, transaction, or

relationship that might give rise to a conflict of interest, employees must seek review from their managers or the HR Department.

Gifts, Gratuities, and Business Courtesies

CWS is committed to competing solely on the merit of our services. We should avoid any actions that create a perception that favorable treatment of outside entities by CWS was sought, received, or given in exchange for personal business courtesies. Business courtesies include gifts, gratuities, meals, refreshments, entertainment, or other benefits from persons or companies with whom CWS does or may do business. We will neither give nor accept business courtesies that constitute nor could reasonably be perceived as constituting unfair business inducements that would violate the law, regulation, or policies of CWS or participants, cause embarrassment, or negatively affect CWS' reputation.

Accepting Business Courtesies

Most business courtesies offered to us during employment are because of our positions at CareWell Services. We should not feel any entitlement to accept and keep a business courtesy. Although we may not use our function at CWS to obtain business courtesies, we must never ask for them. Instead, we may accept unsolicited business courtesies that promote successful working relationships and goodwill with the businesses CWS maintains or may establish a business relationship.

Employees who award contracts or who can influence the allocation of business, who create specifications that result in the placement of business, or who participate in the negotiation of agreements must be conscientious about avoiding actions that make the appearance of favoritism, or that may adversely affect the Agency's reputation for impartiality and fair dealing. The prudent course is to refuse a courtesy from a supplier when CWS is involved in choosing or reconfirming a supplier or under circumstances that would create an impression that offering courtesies are the way to obtain CWS' business.

Meals, Refreshments, and Entertainment

We may accept occasional meals, refreshments, entertainment, and similar business courtesies that are shared with the person who has offered to pay for the meal or entertainment provided that:

- 1. They are not inappropriately lavish or excessive.
- 2. Courtesies are rare and do not reflect a pattern of regular acceptance of courtesies from the same person or entity.
- 3. Courtesy does not create the appearance of an attempt to influence business decisions, such as accepting courtesy or entertainment from a supplier whose contract is expiring shortly.

The employee accepting the business courtesy would feel comfortable discussing it with their manager or coworker or having the courtesy known by the public.

Gifts

Employees may accept unsolicited gifts, other than money, which conform to the reasonable ethical practices of the marketplace, including:

- 1. Flowers, fruit baskets, and other modest presents commemorate a special occasion.
- 2. Gifts of nominal value, such as calendars, pens, mugs, caps, and t-shirts (or other novelty, advertising, or promotional items).

Generally, employees may not accept compensation, honoraria, or money of any amount from entities with whom CWS does or may do business. However, tangible gifts (including tickets to a sporting or entertainment event) with a market value greater than \$25 may only be accepted if the Executive Team approves.

Employees with questions about accepting business courtesies should talk to their managers or the HR Department.

Offering Business Courtesies

Any employee who offers a business courtesy must ensure that it cannot reasonably be interpreted as an attempt to gain an unfair business advantage or otherwise reflect negatively upon CareWell Services. For example, an employee may never use personal funds or resources to do something that cannot be done with CWS resources. However, accounting for business courtesies must be done by approved Agency procedures.

Other than to our government partners, for whom special rules apply, we may provide nonmonetary gifts (i.e., Agency logo apparel or similar promotional items) to our participants. Further, management may approve other courtesies, including meals, refreshments, or entertainment of reasonable value, provided that:

- 1. The practice does not violate any law or regulation or the standards of conduct of the recipient's organization.
- 2. Business courtesy is consistent with industry practice, infrequent, and lavish.
- 3. Business courtesy is accurately reflected on the books and records of CareWell Services.

Set Metrics and Report Results Accurately

Accurate Public Disclosures

We will ensure that all disclosures in financial reports and public documents are complete, fair, accurate, timely, and understandable. This obligation applies to all employees, including all financial executives, with any responsibility for preparing such reports, including drafting, reviewing, and signing or certifying the information contained therein. No business goal is ever an excuse for misrepresenting facts or falsifying records.

Employees should inform Executive Management and the HR Department if they learn that information in any filing or public communication was untrue or misleading when it was made or if subsequent information would affect a similar future filing or public communication.

Corporate Recordkeeping

We create, retain, and dispose of our Agency records as part of our regular course of business in compliance with all CWS' policies and guidelines and all regulatory and legal requirements.

All corporate records must be true, accurate, and complete, and Agency data must be promptly and accurately entered into our books by CWS and other applicable accounting principles.

CWS will provide upon request the following information to MDHHS representatives and authorized federal and State personnel, including, but not limited to, MDHHSOIG, the Michigan Department of Attorney General, the US Department of Health and Human Services, US Office of Inspector General (DHHS OIG) and the Department of Justice (DOJ), and any other duly authorized State or federal agency must have immediate and complete access to all records pertaining to services provided to Michigan Medicaid Enrollees, without first obtaining authorization from the Enrollee to disclose such information (42 CFR § 455. 21 and 42 CFR § 431. 107).

CWS will retain and make all records (including, but not limited to, financial, medical, and enrollee grievance and appeal records, base on data in 42 CFR 438. 5(c), Medical Loss Ratio (MLR) reports in 42 CFR 438. 8(k), and the data, information, and documentation specified in 42 CFR 438. 604, 438. 606, 438. 608, and 438. 610) available at the MCE's, provider's, and/or the subcontractor's expense for administrative, civil, and/or criminal review, audit, or evaluation, inspection, investigation, and/or prosecution by authorized federal and state personnel, including representatives from the MDHHS-OIG, the Michigan Department of Attorney General,

DHHS OIG and the DOJ, or any duly authorized State or federal agency for 10 years from the final date of the contract period or from the date of completion of any audit, whichever is later.

We must not improperly influence, manipulate, or mislead any unauthorized audit nor interfere with any auditor engaged to perform an independent internal audit of CWS' books, records, processes, or internal controls.

Promote Substance Over Form

We are all faced with decisions we would rather not have to make and issues we would prefer to avoid. Sometimes, we hope that if we avoid confronting a problem, it will simply go away.

At CWS, we must have the courage to tackle tough decisions and make difficult choices, secure in the knowledge that CWS is committed to doing the right thing. At times this will mean doing more than simply what the law requires. But merely because we can pursue a course of action does not mean we *should* do so.

Although CWS' guiding principles cannot address every issue or answer every dilemma, they can define the spirit in which we intend to do business and should guide us in our daily conduct.

Accountability

We are responsible for knowing and adhering to the values and standards outlined in this Code and for raising questions if we are uncertain about Agency policy. If we are concerned whether the standards are being met or are aware of violations of the Code, we must contact the Human Resources Department.

CWS takes seriously the standards outlined in the Code, and violations are cause for disciplinary action up to and including termination of employment.

Be Loyal

Confidential and Proprietary Information

Integral to CWS' success is protecting confidential Agency information and nonpublic information entrusted to us by employees, participants, and other business partners. Confidential and proprietary information includes pricing and financial data, participant names/addresses, or nonpublic information about other companies, including current or potential suppliers and vendors. We will not disclose confidential and nonpublic information without a valid business purpose and proper authorization.

Use of Agency Resources

Agency resources, including time, material, equipment, and information, are provided for business use. Nonetheless, occasional personal use is permissible as long as it does not affect job performance or cause a disruption to the workplace.

Employees and those representing CWS are trusted to behave responsibly and use good judgment to conserve Agency resources. Managers are responsible for the resources assigned to their departments and are empowered to resolve issues concerning their proper use.

Generally, we will not use Agency equipment such as computers, copiers, and fax machines in the conduct of an outside business or support any religious, political, or other outside daily activity, except for Agency requested support to nonprofit organizations. Therefore, we will not solicit contributions nor distribute non-work-related materials during work hours.

To protect the interests of the CWS' network and our fellow employees, CWS reserves the right to monitor or review all data and information on an employee's Agency-issued computer or electronic device, the use of the internet, or CWS' intranet. We will not tolerate the use of Agency resources to create, access, store, print, solicit

or send any materials that are harassing, threatening, abusive, sexually explicit, or otherwise offensive or inappropriate.

Questions about the proper use of Agency resources should be directed to your manager.

Media Inquiries

CWS is a high-profile Agency in our community, and reporters and other media members may approach employees from time to time. To ensure we speak with one voice and provide accurate information about the Agency, we should direct all media inquiries to the CEO. No one may issue a press release without first consulting with the CEO. If the CEO is unavailable for an extended period, the COO may communicate with the media.

Do the Right Thing

Several key questions can help identify situations that may be unethical, inappropriate, or illegal. Ask yourself:

- 1. Does my actions comply with the CWS' guiding principles, Code of Conduct, and Agency policies?
- 2. Have I been asked to misrepresent information or deviate from the standard procedure?
- 3. Would I feel comfortable describing my decision at a staff meeting?
- 4. How would it look if it made the headlines?
- 5. Am I being loyal to my family, my agency, and myself?
- 6. What would I tell my child to do?
- 7. Is this the right thing to do?

Information and Resources:

Chief Executive Officer

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269-968-7334 Desk

269-441-0963 Fax

Chief Operating Officer

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HR & IT Coordinator

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269-441-0963 Fax

REGION 3B AREA AGENCY ON AGING



200 West Michigan Avenue, Suite 102, Battle Creek, MI 49017

Code of Ethics and Business Conduct Certificate of Receipt

I certify that I have received and read a copy	of the Code of Ethics and Business Conduct for CWS.
Employee/Board Member Name in Print	_
Signature of Employee/Board Member	±8
Date Signed by Employee/Board Member	-
TO BY DI A CENT IN THE	

TO BE PLACED IN THE EMPLOYEE/BOARD MEMBER ELECTRONIC FILE



POLICY TITLE: Criminal Background	nd Checks			• •	POLICY NUMBER: HR. COMP. 010
CREATION DATE:	EFFECTIVE DATE:	REVIEW DATES:		APPRO	VAL DATE:
05/2022	05/2022	3/2023/4/2023		5/2022	
APPLIES TO:			MANU	AL:	· · · · · · · · · · · · · · · · · · ·
All CWS Employees/Sub-contractors/Agents/Board Members/Volunteers		Fraud (Compliance	Plan	
DIIDDOCE.					-

PURPOSE:

Consistent with the Older Americans Act [42 USC 3025(a)(1)(C)] and the Older Michiganians Act [MCL 400.586(c) and (k)], the Aging, Community Living, and Supports (ACLS Bureau) is primarily responsible for the planning, policy, development, administration, coordination, priority setting, and evaluation of all state activities and supervising all agencies receiving funds from the state agency. This policy outlines a procedure for criminal background checks to safeguard older adults' welfare and increase assurance that they are better protected from potential abuse and exploitation.

POLICY:

- CareWell Services (CWS) will conduct or cause to be conducted a criminal background check that
 reveals information similar or substantially similar to information found on an Internet Criminal
 History Access Tool (ICHAT) check and a national and state sex offender registry check for each new
 employee, employee, subcontractor, subcontractor employee, board members, and volunteer who has
 in-person client contact, in-home client contact, access to a client's personal property, or access to
 confidential client information:
- 2.
- a. ICHAT: http://apps.michigan.gov/ichat
- b. Michigan Public Sex Offender Registry: http://www.mipsor.state.mi.us
- c. National Sex Offender Registry: http://www.nsopw.gov
- 3. Criminal background checks for new hires must be completed before the individual works directly with clients or has access to a client's personal property or confidential client information.
- 4. CWS is required to update criminal background checks for all employees, board members, and volunteers every three years to identify convictions in the event they occur while an individual is employed or providing volunteer service:



- a. All employees and volunteers hired <u>prior to</u> the effective date of this policy must be re-screened within 90 days from the effective date of this policy. Thereafter, criminal background checks for these employees, board members, and volunteers must be completed no later than 30 days after every third anniversary from the date of their last background check.
- b. Updated criminal background checks for employees, board members, and volunteers hired after the effective date of this policy must be completed no later than 30 days after every third anniversary of their hire date.
- 5. The use of information obtained from a criminal background check shall be restricted to determining suitability for employment, board members, and volunteer opportunities. CWS must maintain a copy of the results of each criminal background check for paid and volunteer staff in a confidential and controlled access file. The information should not be used in violation of any applicable Federal or State equal employment opportunity law or regulation.

DEFINITIONS:

- 1. Exclusions: No employee, board member, or volunteer shall be permitted to work directly with clients or have access to a client's personal property or confidential client information if:
 - a. <u>Mandatory Exclusions:</u> The results of the criminal background check show that the person has a federal or state felony conviction related to one or more of the following crimes:
 - i. Crimes against a "vulnerable adult" as outlined in MCL 750.145n et seq;
 - ii. Violent crimes including, but not limited to, murder, manslaughter, kidnapping, arson, assault, battery, and domestic violence;
 - iii. Financial crimes including, but not limited to, fraud, forgery, counterfeiting, embezzlement, and tax evasion;
 - iv. Sex crimes including, but not limited to, rape, sexual abuse, criminal sexual conduct, and prostitution;
 - v. Cruelty or torture;
 - vi. Abuse or neglect; or
 - vii. Felony involving the use of a firearm or dangerous weapon.
 - b. <u>Felony Convictions</u>: The results of the criminal background check show that the person has a federal or state felony conviction within the preceding ten years from the date of the background check, including but not limited to:



- i. Crimes involving state, federal, or local government assistance programs;
- ii. Theft crimes including, but not limited to, larceny, burglary, robbery, extortion, false pretenses, false representation, and conversion; or
- iii. Drug crimes including, but not limited to, possession, delivery, and manufacturing.
- c. <u>Misdemeanor Convictions</u>: The results of the criminal background check show that the person has a federal or state misdemeanor conviction within the preceding five years from the date of the background check, including but not limited to:
 - i. Crimes involving state, federal, or local government assistance programs;
 - ii. Crimes against a "vulnerable adult" as outlined in MCL 750.145n et seq;
 - iii. Financial crimes including, but not limited to, fraud, forgery, counterfeiting, embezzlement, and tax evasion;
 - iv. Theft crimes including, but not limited to, larceny, burglary, robbery, extortion, false pretenses, false representation, and conversion;
 - v. Sex crimes including, but not limited to, rape, sexual abuse, criminal sexual conduct, and prostitution;
 - vi. Drug crimes including, but not limited to, possession, delivery, and manufacturing;
 - vii. Cruelty or torture;
 - viii. Abuse or neglect;
 - ix. Home invasion;
 - x. Assault or battery; or
 - xi. Misdemeanor involving the use of a firearm or dangerous weapon with the intent to injure, the use of a firearm or dangerous weapon that results in a personal injury, or a misdemeanor involving the use of force or violence or the threat of the use of force or violence.
- d. For purposes of the excluded offenses identified above, an individual is considered to have been convicted of a criminal offense when:
 - i. a judgment of conviction has been entered against the individual or entity by a federal, state, tribal, or local court regardless of whether there is an appeal pending;
 - ii. there has been a finding of guilt against the individual by a federal, state, tribal, or local court; or
 - iii. a plea of guilty or nolo contendere by the individual has been accepted by a federal, state, tribal, or local court.
- e. Arrest records, by themselves, do not disqualify an individual.



PROCEDURE:

- 1. CWS must maintain documentation of all criminal background checks, including a list of all paid, volunteer staff and board members subject to this policy, the date of the most recently completed criminal background check, and the source of the background check. Employees hired prior to the effective date of this policy are not exempt from this requirement.
- 2. ACLS Bureau does not consider Senior Community Service Employment Program (SCSEP) enrollees to be CWS employees, board members, or volunteers for the purposes of this policy. Rather, SCSEP enrollees are participants in a federal employment and training program funded by the U.S. Department of Labor (USDoL). As such, CWS, which serves as a host agency for SCSEP participants, is advised to comply with the USDoL

policy described below:

"Grantees may take the responsibility of providing background checks before placing participants in community service assignments, provided that the background check is conducted because of the requirements of a specific community service assignment, rather than based on a particular participant, and is consistently applied to all applicants considered for that position. Further, we stress that background checks are relevant to the assignment of participants to particular host agency positions only and cannot be used as a basis for denying eligibility. In addition, grantees should be careful to comply with EEOC and any state or local rules regarding the use of background checks."

3. ACLS Bureau field representatives will verify the completeness of criminal background check staff lists during the annual on-site CWS assessment. Additionally, ACLS Bureau field representatives will test a random sample of at least ten percent of employees, board members, and volunteer files for employees, board members, and volunteers that are subject to this criminal background check policy to verify criminal background check documentation for CWS with ten or more paid or volunteer staff. ACLS Bureau field representatives will test all documentation for employees and volunteers that are subject to this criminal background check policy at CWS with less than ten paid or volunteer staff. The results of this review will be included in ACLS Bureau's CWS assessment feedback report.



Release Authorization

In connection with my involvement with Region 3B Area Agency on Aging, I understand that an investigative consumer report may be requested that will include information as to my character, work habits, performance, and experience, along with reasons for the termination of my past employment from previous employers. Further, I understand that you may request information concerning my motor vehicle operation history from various county, state, private, and insurance sources and other public records.

I voluntarily and knowingly authorize any present or past employer or supervisor; college or university or other institution of learning; administrator; law enforcement agency, a state agency, MDHHS-OIG, branch or the national personnel records center; personal reference; and other persons to give records or information they may have concerning my criminal history, motor vehicle driving history, earnings history, credit history, worker's comp. Claims, character and employment records, and any other information request to Region 3b area agency on aging. I voluntarily and knowingly unconditionally release any named or unnamed informant from any and all liability resulting from furnishing this information. This authorization shall be valid for one year from the date signed, and a photographic or faxed copy of this authorization shall be as good as the original.

This release includes all county, state, and federal agencies. According to the Fair Credit Reporting Act, I am entitled to know if my involvement is denied because of information obtained by my prospective employer from a consumer reporting agency. If so, I will be advised and given the agency's name or source of information.

Applicant Signature	Date		
The following must be filled in	entirely for your involvement to be considered.	(PLEASE PRINT	CLEARLY)
Last Name	First Name		Middle Name
Current Address		<u>.</u>	
City	State	County	Zip Code
Date of Birth	Gender	Soci	al Security Number
Driver's License Number	State Where Driver's License Issued		
Important - List other names y	ou have used in the last seven years.		
Maiden/ A.K.A Name	Middle	Last date	used:Last First
Maiden/ A.K.A Name	Middle	Last date t	used: Last First



POLICY TITLE: POLICY NUMBER: Appropriate Use or Disclosure and/or the HIPPA HR. COMP. 040 **CREATION DATE: EFFECTIVE DATE: REVIEW DATES:** APPROVAL DATE: 11/01/2022 1/03/2023 12/01/2022 **APPLIES TO:** MANUAL: All CWS Employees/Sub-contractors/Agents/Board Employee Handbook/Compliance Plan Members/Volunteers

PURPOSE:

CWS has adopted a policy that protects the privacy and confidentiality of protected health information (PHI) whenever company representatives use it. The private and confidential use of such information will be the responsibility of all individuals with job duties requiring access to PHI in the course of their jobs.

POLICY:

Protected Health Information Defined

PHI refers to individually identifiable health information received by the Agency's group health plans or received by a health care provider, health plan, or health care clearinghouse that relates to the past or present health of an individual or to payment of health care claims. PHI information includes medical conditions, health status, claims experience, medical histories, physical examinations, genetic information, and evidence of disability.

- A. Issuing procedural guidelines for access to PHI.
- B. Developing a matrix for personnel who will need access to PHI.
- C. Developing guidelines for describing how and when PHI will be maintained, used, transferred, or transmitted.

DEFINITIONS:

Annual Activities Necessitating Use of PHI

Annually or more frequently as necessary, CWS performs enrollment, changes in enrollment, and payroll deductions; assists in claims problem resolution and explanation of benefits issues; and assists in coordinating benefits with other providers. In addition, some or all of these activities may require using or transmitting PHI. Thus, all information related to these processes will be maintained in confidence. Employees will only disclose PHI from these processes for employment-related actions if provided by administrative procedures approved by the Human Resources Department.



General rules follow:

- 1) Disclosures that do not qualify as PHI-protected disclosures include:
 - a) Disclosure of PHI to the individual to whom the PHI belongs.
 - b) Requests by providers for treatment or payment.
 - c) Disclosures requested to be made to authorized parties by the individual PHI holder.
 - d) Disclosures to government agencies for reporting or enforcement purposes.
 - e) Disclosures to workers' compensation providers and those authorized by the workers' compensation providers.
- 2) Information regarding whether a plan covers an individual for claims processing purposes may be disclosed.
- 3) Information external to the health plan is not considered PHI if the information is being furnished for claims processing purposes involving workers' compensation or short- or long-term disability and medical information received to verify Americans with Disabilities Act (ADA) or Family and Medical Leave Act (FMLA) status.

PROCEDURE:

Records Retention

Personnel records and disclosures of PHI will be maintained for six years as federal law requires unless state law requires a more extended retention period. In addition, documents held for the maximum interval will be destroyed to ensure that the company record destruction policy does not compromise such data.



HR. COMP. 040 HIPPA Policy Certificate of Receipt

I hereby certify that I have received and read a	copy of CWS'	HR. COMP. 04	10 Policy
Employee/Board Member Name in Print			
Signature of Employee/Board Member			
Date Signed by Employee/Board Member			

TO BE PLACED IN THE EMPLOYEE/BOARD MEMBER ELECTRONIC FILE



POLICY TITLE: Fraud, Waste, and A	Abuse Policy				POLICY NUMBER: HR. COMP. 030
CREATION DATE:	EFFECTIVE DATE:	REVIEW DATES:		APPRO	VAL DATE:
3/1/2019	3/1/2019	3/01/2023		3/1/2019	
APPLIES TO:				AL:	
All CWS Employees/Subcontractors/Agents/Board Members/Volunteers			Compli	ance Plan	
PURPOSE:					···

Each business services issue line is subject to review the conformity with accepted practices and plan coverage limitations. The post and pre-payment review of claims ensures the participants' services are appropriate. necessary, and comply with the planning policy. The study of claims is to verify that services were billed appropriately and that resources were utilized to the fullest extent available.

POLICY:

All CWS Employees/Subcontractors/Agents/Board Members/Volunteers, their delegates, and/or individuals under a contractual agreement must comply with all State and Federal Laws.

Standards:

State Law requirement per the Michigan Attorney General for investigating Medicaid providers:

Medicaid False Claim Act (MCL 400.601et.seq)

Any individual, whether a provider, an employee, or an accomplice, convicted of submitting false claims is subject to a fine up to \$50,000 and a prison sentence of four to ten years for each count, as well as full restitution to the Medicaid Program for a period of time and, in some instances, their license to practice their profession may be suspended or revoked.

Examples included but are not limited to:

- a) Billing for services not rendered.
- b) Billing without reporting payments from other sources, such as Medicare.
- c) Billing for a brand name drug when a generic substitute was dispensed.
- d) Misrepresenting the participant's diagnosis in order to bill for unnecessary tests and procedures.
- e) Billing a date of service other than the actual date services were rendered.
- f) Accepting "kickbacks" as a form of cash payment or gifts in exchange for favorable treatment.
- g) Fraudulent Cost Reporting Social Welfare Act (MCL 400.111d) Public Health Code (MCL 333.16226)



Federal Law requirements per the Office of Inspector General (OIG):

OIG is mandated to protect the integrity of the Department of Health and Human Services and the health and welfare of the beneficiaries of those programs. OIG has a responsibility to report to both the Human Services Secretary and the Congress program problems and recommendations to correct them. OIG duties are carried out through a network of audits, investigations, inspections, and other related functions performed by OIG components. In addition, the Office of Investigations is responsible for conducting and coordinating activities related to fraud, waste, and abuse in more than 300 Health and Human Services programs.

Social Security Act (Section 1909)

A conviction resulting in a penalty of up to five years imprisonment and/or a \$10,000 fine. Civil Monetary Penalties Law of 1981 (Section 1128A of the Social Security Act). A conviction may result in a civil monetary penalty of not more than \$2,000 for each item or service and an assessment of not more than twice the amount claimed for each such item or service in lieu of damages sustained by the federal or state agency because of the fraudulent claim.

Violations of Section 1128A include but are not limited to:

Billing for claims for medical items for services, which were not provided Billing Codes for services that result in a higher reimbursement than what actually rendered services rendered by an individual who was not a licensed physician. Coverage is not in effect on the date of service. Billing for services that were not medically necessary. Hospitals that knowingly make payments to a physician as an inducement to reduce or limit services to physicians who accept such payments.

The Compliance Officer will create measuring and audit tools to perform risk assessments with each Agency department to determine high-risk issues and create action steps to prevent them. These assessments take place quarterly during the following schedule December, March, June, and conclude in September. Please note that the Compliance Officer may alter this schedule at any time pending notification of Fraud/Waste/Abuse.

Risk assessments performed include and are not limited to the following:

- a) Kickback arrangements
- b) Coding
- c) Claim development and submission
- d) Cost Reporting
- e) Reimbursement



APPEALS:

Appeals must be submitted in writing within 30 days of our Private Investigation Activities' final decision of Fraud, Waste, and Abuse findings. Our internal Appeals and Grievances Committee will handle appeals. A final ruling on the appeal will be decided within 90 days of the appeal filing.

DEFINITIONS:

Abuse

Provider practices that are inconsistent with sound fiscal, business, or clinical practices and result in an unnecessary cost to the Medicaid program or reimbursement for services that are not medically necessary or that fail to meet professionally recognized standards of care. It also includes beneficiary practices that cost the Medicaid program unnecessarily.

Fraud (per CMS)

An intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to themselves or another person. It includes any act that constitutes fraud under applicable Federal or State law, including but not limited to the Federal Claims Act and the Michigan False Claims Act.

Fraud (per Michigan Court of Appeals)

Michigan law permits a finding of Medicaid fraud based upon "constructive knowledge." This means that if the course of conduct reflects a systematic or persistent tendency to cause inaccuracies, then it may be fraud rather than simply a good faith error or mistake.

Waste

Overutilization of services or other practices that result in unnecessary costs. Generally, they are not considered caused by criminally negligent actions but rather by the misuse of resources.



PROCEDURE:

If you suspect claims or activity related to Fraud, Waste, or Abuse, report it to the Chief Financial and Compliance Officer through one of the following mechanisms:

Telephone Hotline: 1-877-342-6495

Electronic Mail: gwinsor@carewellservices.org
Website report: www.carewellservices.org

In-person or Mail Delivery to the following address:

Glin Winsor

Chief Financial & Compliance Officer

200 W. Michigan, Suite 102 Battle Creek, MI 49017

REFERENCES:

Michigan Medicaid False Claims Act, MCL 400.601 et. Seq. Federal False Claims Act, 31 U.S.C. §§ 3729 Civil Monetary Penalties Law, 42 U.S.C. §§ 1320a-7a, 42 CFR pt. 1003



HR. COMP. 030 Fraud Waste and Abuse Policy Policy Certificate of Receipt

I have received and read a copy of CWS' H	R. COMP. 030 Policy
Employee/Board Member Name in Print	_
Signature of Employee/Board Member	
Date Signed by Employee/Board Member	

TO BE PLACED IN THE EMPLOYEE/BOARD MEMBER ELECTRONIC FILE



POLICY TITLE: POLICY NUMBER: False Claims Act and Whistleblower's Protection EMP. COMP 020 **CREATION DATE:** EFFECTIVE DATE: REVIEW DATES: APPROVAL DATE: 1/2014 1/2014 4/2018, 2/2023 1/2014 APPLIES TO: MANUAL: All CWS Employees/Sub-contractors/Agents/Board Compliance Plan Members/Volunteers

PURPOSE:

The purpose of this policy is to educate employees, volunteers, contractors, and agents concerning the requirements of the Deficit Reduction Act (DRA) of 2005, Section 6032(a)(3) (Originally 31 USC § 3729-3733, Amended to include PL 109-171, Section 6032(a)(3) of the Deficit Reduction Act (DRA) of 2005, 2007), which contains provisions to combat fraud and abuse in government health care programs.

Under the Deficit Reduction Act, Region 3B Area Agency on Aging dba CareWell Services Southwest (CWS) is required to provide employees, contractors, and agents with information regarding Federal and State false claims laws, administrative remedies under those laws, whistle-blower protections to employees who report incidents of false claims, and CWS' programs for detecting and preventing fraud, waste, and abuse in Medicaid and other federally funded health care programs. In addition, CWS strives to prevent, detect, and eliminate fraud, waste, and abuse in all government and grant-based programs from which it receives payments, such as Medicaid.

POLICY:

This policy is intended for all CWS employees, contractors, and agents. The policy can also be found in our Agency Employee Manual, DPOS Subcontract documents for providers/agents and will cover the following Acts with procedures as seen below.

DEFINITIONS:

The policy will cover the Acts listed below:

Federal False Claims Act (FCA)

The FCA prohibits any person from knowingly presenting or causing to be presented or causing to be presented a false or fraudulent claim to the United States government for payment. The FCA imposes civil liability on any person who:

- a) Knowingly presents a false or fraudulent claim for compensation or approval.
- b) Knowingly makes or uses a false record or statement to get a false or fraudulent claim paid or approved.



- c) Conspires with another to get a false or fraudulent claim paid or allowed.
- d) Knowingly makes or uses a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property.
- e) Commits other fraudulent acts enumerated in the statute.

The FCA construes the terms "knowing" and "knowingly" broadly to include not only actual knowledge of the information but also acts of deliberate ignorance and/or reckless disregard of the truth or falsity of the information.

Program Fraud Civil Remedies Act

The Program Fraud and Remedies Act is another federal statute that attempts to prevent and detect waste, fraud, and abuse in federal health care programs. Among other things, this Act imposes civil liability on any person who submits a claim knowing or having reason to know that the claim:

Is false, fictitious, or fraudulent. Includes or is supported by any written statement which asserts a material fact that is false, fictitious, or fraudulent. Has or is endorsed by any written notice that omits a material fact, is wrong, fictitious, or fraudulent as a result of such omission, and is a statement in which the person has a duty to include certification of the truthfulness and accuracy of the information.

Medicaid False Claim Act (MFCA)

Michigan has a companion law known as the Medicaid False Claims Act. This act imposes prison terms of up to four years and fines of up to 50,000 for:

Knowingly make or cause to be made a false statement or false representation of a material fact in an application for Medicaid benefits or in determining rights to a Medicaid benefit;

Soliciting, offering, or receiving kickbacks or bribes for referrals to another Medicaid-funded service Entering into an agreement with another to defraud Medicaid through a false claim; or Making or presenting to the State of Michigan a false claim for payment.

Billing, Encounters, and Cost Reporting

CWS is committed to programming care and diligence in processing claims it submits for payment through Medicaid. Each person entering claims is charged with compliance with the billing rules. Any false, inaccurate, or questionable claims should be reported to the proper administration staff for a full review. Examples of false claims include knowingly:

- a) Billing for services not rendered.
- b) Inaccurate costs for services.
- c) Billing for services that have yet to be ordered.



CWS has procedures in place only to allow the following:

- a) Every service provided must have supervisory approval.
- b) Every service must be in the participant's service plan.

Each provider is either signed up in Vendor Billing with electronic signature verification on file or provides paper billing with the participant's name, service date, units delivered, and total cost. Every service delivery is prior approved through an electronic delivery system which notifies the authorized service provider.

Data staff cross-check the incoming billing against the service authorization for accuracy. All other policies and procedures for the purchase of service also apply.

PROCEDURE:

The Federal False Claims Act includes a "qui tam," or whistleblower provision to report misconduct involving false claims. The qui tam allows any private person (Qui Tam Relater) with actual knowledge of allegedly false claims to file a lawsuit on behalf of the United States government.

Under the Michigan Medicaid False Claims Act, a (Qui Tam Relater) may bring a civil action on behalf of the state of Michigan to recover losses from a person violating the act.

Whistleblower Protection Laws

Federal and State laws protect individuals who investigate or report possible False Claims made by their employer against discharge or discrimination in employment because of such investigation. Employees discriminated against based on whistleblower activities may sue in court for damages. However, under federal or state law, an employer is liable to the employee for reinstatement, two times the amount of pay, interest, and compensation for any special damages to make the employee whole.

CWS is proactive about combating potential fraud and abuse through the annual training of its employees regarding fraud and abuse prevention, recognition and reporting, and new employee training.



HR. COMP. 020 False Claims Act and Whistleblower's Protection Policy. Certificate of Receipt

I have received and read a copy of CWS' HR.	COMP. 020
Employee/Board Member Name in Print	
Signature of Employee/Board Member	
Date Signed by Employee/Board Member TO BE PLACED IN THE EMPLOYEE/BO	ARD MEMBER ELECTRONIC ELLE

Marketing, Outreach, MMAP, Programming Review: August 21, 2023

- 1. Networking/Committee Meetings
 - a. Senior Times-Stacy or Cassie if requested by Stacy
 - b. Albion Health & Wellness Action Team Luann
 - c. SWAN-Cassie ~ 1x per quarter
 - d. Miles For Memories-Cassie
 - e. CPAN August attendance Cassie
 - f. VA Homelessness Stand Down planning committee-Cassie
 - g. Hunger Free Restaurant program ending 10/1?
 - h. Access to Care Committee-Karen/Jodi
 - i. Barry County Resource Network-Karen
 - j. Barry Health Services Network-Rotating Staff-Karen, Shannon, Jodi
 - k. Albion In Motion-Karen
 - I. Elder Abuse Prevention Coalition RESTART—Oct, Jan, April, July

2. Events

- a. 8/9 Burma Center Dinner N Learn Karen and Cassie 14 attendees.
- b. 8/16 Calhoun County Fair Senior Day Cassie, Jodi, Karen, Paulette 800+ attendees
- c. 8/26 Hastings Summerfest Karen
- d. 8/26 Presbyterian Church Health Fair Cassie
- e. 9/16 Festival of the Forks LuAnn, Karen
- f. 9/16 Miles for Memories Cassie, Jodi, Stacy, Glin
- g. 9/16 Hispanic Festival Cassie, Jodi
- h. 9/16 Johnstown Township Fire Fighters Golf Outing
- i. 10/12 Tekonsha Health and Safety Fair Cassie, Jodi, Karen, Kim
- j. 10/20 Homeless and Veterans Stand Down Event Cassie, Jodi
- k. Willard Dementia Series restarts end of September—Linda F, Colleen

3. Presentations

- a. 8/28/23 Washington Square Senior Apartments (Kalamazoo) Waiver
- b. 8/30/23 Summit Pointe CWS 101
- c. 10/2023 Springview Tower Apartments CWS 101
- d. 8/14/23-Podcast with M4M, Dementia LIVE-Karen
- e. WestBrook Apartments CWS 101
- f. Coldwater Library Waiver
- g. The Village of Sage Creek Waiver
- h. Westland Meadows Waiver
- i. Constantine Rotary Waiver
- j. VOCES-CWS 101 Cassie/Karen
- k. Trinity Church TOPS Group—CWS 101- Karen
- I. Friends Church Older Adults Group-CWS 101
- m. NP Woods—Rightsizing/Decluttering--Karen

4. Outreach—Cassie's travels

- a. Main Counties
 - a. 8/21 Calhoun (divides into east side, central, south)
- b. Outlier Counties
 - a. 8/3 Berrien SW: 13 planned; 24 completed
 - b. 8/7 Kalamazoo West: 17 planned: 20 completed

- c. 8/17 Berrien NE: 19 Planned; 15 completed
- d. 8/14 St. Joseph County: 21 planned; 25 completed
- e. 8/22 Kalamazoo South: 12 planned
- f. 8/23 Van Buren SE: 22 planned
- g. 8/28 Kalamazoo NorthEast: 17 planned
- h. 8/31 Berrien SE: 28 planned
- 5. Advocacy Activities
- 6. MMAP—Jodi, Cassie continue towards their 18 hours to certify, new AHCA staffer Amanda in training. Team working in Sept to pre-set prior served clients for open enrollment appointments
- 7. Other
 - a. Internal Newsletter on hold new format upcoming for October.

8. Programming Dept:

- a. PERS Client files updates—Ongoing since end of April, Closures have begun. A couple hundred will likely be closed. Calhoun: 562 served now, 227 likely closing. Barry: 238 served now, 135 potential cutoffs early Sept. Will have to reapply with required documents to restart. Ongoing education, client responsibilities flyers in development, fridge magnet planned with testing reminders and contact #s for VRI, CWS
- b. DPATH KFC completed in August.
- c. DPATH Albion/Forks starts this Thursday, 8/24. 13 people registered (max allowable 15)
- d. Powerful Tools for Caregivers (PTC) to Start Sept 11 at KFC, and October 4-Nov 8 Weds 5:30 p.m.- 7:30 p.m. at Grace Church in Nashville, IF enough people sign up to attend. Ongoing challenges with Evidence Based programs to meet minimum number of enrollees timely, despite months of advance promotion.
- e. Dementia Caregiving 3 part Series at Forks-Oct 2, 9, 16, Mondays at 1 p.m. No Cost. Participants preregister by Sept 28 by calling 269-966-2450
- f. Hearing Vision -Donna training almost done to takeover intake/setup, Jodi P. to do ongoing data input and processing of invoices
- g. Cross Training team members for succession and back up planning ongoing—growing MMAP team, PTC, exercise classes, Matter of Balance, Dementia LIVE. MMAP regional Kim Smallcombe Cross training as a CHW this month, Shannon doing her I&A AIRS Certification test.

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