



COMPLIANCE: WHISTLEBLOWER POLICY

A. Purpose

The purpose of this Whistleblower Policy is to ensure that Central New York Care Collaborative, Inc. (the "Corporation") acts in accordance with all applicable laws, regulations and internal policies and that it develops effective lines of communication for the reporting of any concerns surrounding actions taken by or within the Corporation. Through this policy, the Corporation seeks to encourage open communication and the reporting of incidents of potential illegal or otherwise improper conduct.

This policy sets forth the procedures for the reporting and investigation of concerns regarding misconduct and prohibits retaliation against any individual who reports such a concern to the Corporation. All terms not defined herein shall have the meanings ascribed to them in the By-Laws of the Corporation ("By-Laws").

B. Definitions

1. **Policy Administrator.** The Policy Administrator is the individual who has been appointed by the Corporation as the point of contact for any questions regarding this policy and for the reporting of any concerns regarding any possibly illegal, fraudulent or improper behavior by the Corporation or a Covered Person. This person is an employee, officer or director of the Corporation. Unless otherwise determined by the Board, the CNYCC Compliance Officer shall be the Policy Administrator.
2. **Covered Person.** A Covered Person is any and all directors, officers, employees, contractors and volunteers of the Corporation.

C. Applicability

This Policy applies to anyone who is a Covered Person.

D. When to Make a Report

A Covered Person who either knows or has reason to believe that a Covered Person or other person associated or doing business with the Corporation has engaged in the below behavior has an affirmative duty to make a report to the Policy Administrator, or to the Executive Director if the Policy Administrator is not available or is implicated in the report as soon as the person becomes aware of such behavior:

1. Illegal or fraudulent conduct;
2. Harassment;
3. Unethical behavior;



4. Any other behavior that violates the CNYCC PPS Code of Conduct, the Code of Conduct for CNYCC Directors, Staff and Contractors, or any other internal rule of the Corporation.

A report may be made orally or in writing to the Policy Administrator or the person's immediate supervisor, and may be made anonymously to the Compliance Hotline. When making any such report, a Covered Person should ensure that all material details be included. Any and all concerns reported pursuant to this policy will be treated as confidentially as possible under the circumstances and consistent with applicable law.

Any supervisor receiving a report of misconduct should escalate such report to the Policy Administrator, who will then take the lead on reviewing and investigating the report as further described below or will proceed in conjunction with the Compliance Officer, as appropriate. A person making a report is expected to assist in any investigation performed in connection with such concern.

E. Review and Investigation of Reported Concerns

The Policy Administrator is responsible for receiving, reviewing and investigating any reported concerns of inappropriate behavior described in Section D. All investigations shall be performed in a confidential manner, and information related to the report and investigation shall only be disclosed when necessary to expedite the investigation process. Any person who is the subject of a complaint shall not be present at or participate in any deliberations or vote on the matter related to such complaint; provided, however, that the investigating committee may request that the person who is subject to the complaint present information as background or answer questions at an applicable meeting prior to commencement of deliberations or voting. No director who is also an employee of the Corporation shall participate in any Board or Compliance Committee deliberations or voting relating to the administration of this Policy. If a reported concern involves purported conduct of the Policy Administrator, the Policy Administrator shall recuse himself or herself from the investigation process and refer such report to the Compliance Committee and to the Executive Director. The Compliance Officer shall inform the Compliance Committee and Board of any reports made in accordance with this policy.

The Policy Administrator must keep accurate records in connection with reports made under this policy and related investigations. Such records should include the details provided by the reporting individual, the date such report was received, any actions taken by the Policy Administrator to investigate the reported concern(s), all information learned and/or documents obtained in connection with the investigation and the current status of open investigations. The Policy Administrator shall report on all investigations to the Compliance Committee on a regular basis, making such records available to the Committee in advance of the meeting.

F. No Retaliation

The Corporation shall protect from retaliation all Covered Persons who report suspected improper conduct pursuant to this policy. Any such person who in good faith reports any misconduct or suspected misconduct set forth in Section D of this policy shall be free from intimidation, harassment, discrimination or other retaliation, or in the case of an employee, adverse employment consequence.



Any person who violates this Section of this policy shall be subject to disciplinary action, including termination of the person's relationship with the Corporation.

G. Ongoing Compliance

The Board, with appropriate input and assistance from the Compliance Committee, shall be responsible for the adoption, implementation and oversight of this policy. The Compliance Committee shall also be responsible for taking appropriate action when there has been a violation of this policy.

A copy of this policy will be distributed to all Covered Persons at the time such person becomes a Covered Person, and when the policy is amended.

Virginia A. Opipare, Executive Director

Revised April 6, 2018

Approved by the Compliance Committee on April 6, 2018

Approved by the Board of Directors on April 26, 2018