a period of time, not to be less than thirty (30) calendar days, in which Broker provides a written response to the notification and as appropriate, a plan for resolution of the non-compliance.

**Deduction of Damages from Payments** 

Amounts due the State as monetary damages may be deducted by the State from any money payable to Broker pursuant to this Agreement. The Contract Administrator shall notify Broker in writing of any claim for damages at least fifteen (15) days prior to the date the State deducts such sums from money payable to Broker.

The State may, at its sole discretion, return a portion or all of any damages collected as an incentive payment to Broker for prompt and lasting correction of performance deficiencies.

#### COMPLIANCE

The Broker shall have administrative and management arrangements, including a mandatory written compliance plan, which are designed to guard against fraud and abuse. An electronic copy of the Broker's written compliance plan, including all relevant operating policies, procedures, workflows, and relevant chart of organization must be submitted to the EOHHS for review and approval within 90 days of the execution of this Agreement and then on an annual basis thereafter. The Broker will participate in EOHHS' Annual Compliance Audit.

# Prohibited Affiliations with Individuals Debarred by Federal Agencies

The Broker may not knowingly have a relationship with the following:

- An individual who is debarred, suspended, or otherwise excluded from participating in procurement activities under the Federal Acquisition Regulation or from participating in non-procurement activities under regulations issued under Executive Order No. 12549 or under guidelines implementing Executive Order No. 12549.
- 2. An individual who is an affiliate, as defined in the Federal Acquisition Regulation, of a person described in paragraph (1) of this section.

Disclosure of the Broker's Ownership and Control Interest

The Broker must submit completed forms documenting full and complete disclosure of the Broker's ownership and controlling interest, formatted in conformance with requirements established by EOHHS. Disclosures will be due at any of the following times:

- (1) Upon the transportation broker submitting the proposal in accordance with the State's procurement process.
- (2) Upon the transportation broker executing the contract with the State.
- (3) Upon renewal or extension of the contract.
- (4) Within thirty-five (35) days after any change in ownership of the transportation broker.

(5) The following information shall be disclosed by the Broker:

a.

i. The name and address and address of any person (individual or corporation) with an ownership or control interest in the disclosing entity. The address for corporate entities must include as applicable business address, every business location, and P.O. Box address.

ii. Date of birth and Social Security Number (in the case of an individual).

- iii. Other tax identification number (in the case of a corporation) with an ownership or control interest in the disclosing entity (or transportation broker) or in any subcontractor in which the disclosing entity (or transportation broker) has a five (5) percent or more interest.
- b. Whether the person (individual or corporation) with an ownership or control interest in the disclosing entity (or transportation broker) is related to another person with an ownership or control interest in the disclosing entity as a spouse, parent, child, or sibling; or whether the person (individual or corporation) with an ownership or control interest in any subcontractor in which the disclosing entity (or transportation broker) has a five (5) percent or more interest is related to another person with ownership or control interest in the disclosing entity as a spouse, parent, child, or sibling.

c. The name of any other disclosing entity (or transportation broker) in which an owner of the disclosing entity (or transportation broker) has an ownership or control interest.

d. The name, address, date of birth, and Social Security Number of any managing employee of the disclosing entity (or transportation broker).

The Broker must keep copies of all ownership and control interest requests from EOHHS and the Broker's responses to these disclosure requests. Copies of these requests and the Broker's responses to them must be made available to the Secretary of the United States Department of Health and Human Services or to the EOHHS upon request. The Broker must submit copies of the completed disclosure forms to the Secretary of the United States Department of Health and Human Services or to EOHHS within thirty-five (35) days of a written request.

## Disclosure by Providers: Information on Ownership and Control

The Broker must require each disclosing entity to disclose the following information:

1)

i. The name and address and address of any person (individual or corporation) with an ownership or control interest in the disclosing entity. The address for corporate entities must include as applicable business address, every business location, and P.O. Box address.

ii. Date of birth and Social Security Number (in the case of an individual).

iii. (iii) Other tax identification number (in the case of a corporation) with an ownership or control interest in the disclosing entity (or transportation broker) or in any subcontractor in which the disclosing entity (or transportation broker) has a five (5) percent or more interest.

- 2) Whether the person (individual or corporation) with an ownership or control interest in the disclosing entity is related to another person with an ownership or control interest in the disclosing entity as a spouse, parent, child, or sibling; or whether the person (individual or corporation) with an ownership or control interest in any subcontractor in which the disclosing entity has a five (5) percent or more interest is related to another person with ownership or control interest in the disclosing entity as a spouse, parent, child, or sibling.
- 3) The name of any other disclosing entity in which an owner of the disclosing entity has an ownership or control interest.
- 4) The name, address, date of birth, and Social Security Number of any managing employee of the disclosing entity.

An individual is considered to have an ownership or control interest in a provider entity if it has direct or indirect ownership of five (5) percent or more, or is a managing employee (such as a general manager, business manager, administrator or director) who exercises operational or managerial control over the entity part thereof, or who directly or indirectly conducts the day-to-day operations of the entity or part thereof, as defined in section 1126(b) of the Social Security Act and under 42 CFR Section 1001.10 0 1(a)(1).

Any disclosing entity that is subject to periodic certification by the Broker of compliance with Medicaid standards (such as at the time of initial credentialing and re-credentialing by the Broker) must supply the information as specified in this section in conformance with requirements established by the EOHHS. Any disclosing entity that is not subject to periodic certification of its compliance within the prior 12-month period must submit the information to the Broker before entering into a contract or agreement with the Broker.

Disclosures must also be provided by any provider or disclosing entity within thirty-five (35) days after any change in ownership of the disclosing entity.

Updated information must be furnished to the Secretary of the United States Department of Health and Human Services or to EOHHS at intervals between recertification or contract renewals, within thirty-five (35) days of a written request.

The Broker shall not approve a transportation provider agreement and must terminate an existing provider agreement or contract if the provider fails to disclose ownership or control information as required by this section.

## Disclosure by Providers: Information Related to Business Transactions

The Broker must enter into an agreement with each TP under which the provider agrees to furnish to it or to the Secretary of the United States Department of Health and Human Services or to EOHHS on request full and complete information related to business transactions.

A provider must submit, within thirty-five (35) days of the date of a request by the Secretary of the United States Department of Health and Human Services or the EOHHS, full and complete information about the ownership of any subcontractor with whom the provider has had business transactions totaling more than

twenty-five thousand (\$25,000) dollars during the 12-month period ending on the date of request; and any significant business transactions between the provider and any wholly owned supplier, or between the provider and any subcontractor during the five-year period ending on the date of the request.

This information must be submitted by a provider or a subcontractor to the Secretary of the United States Department of Health and Human Services or to the Rhode Island EOHHS within thirty-five (35) days of a written request.

## Disclosure by Providers: Information on Persons Convicted of Crimes

Before the Broker enters into or renews a provider agreement, or at any time upon written request by EOHHS, the provider must disclose the identity of any person who:

- 1. Has ownership or control interest in the provider, or is an agent or managing employee of the provider; and
- 2. Has been convicted of a criminal offense related to that person's involvement in any program under Medicare, Medicaid, or the Federal Title XX program since the inception of those programs.

An individual is considered to have an ownership or control interest in a provider entity if it has direct or indirect ownership of five (5) percent or more, or is a managing employee (such as a general manager, business manager, administrator or director) who exercises operational or managerial control over the entity or part thereof, or who directly or indirectly conducts the day-to-day operations of the entity or part thereof, as defined in section 1126(b) of the Social Security Act and under 42 CFR 1001.1001(a)(1).

The Broker shall promptly notify EOHHS in writing within ten (10) business days in the event that the Broker identifies an excluded individual with an ownership or control interest.

The Broker may refuse to enter into or renew an agreement with a provider if any person who has an ownership or control interest in the provider, or who is an agent or managing employee of the provider, has been convicted of a criminal offense related to that person's involvement in any Federal health care program.

The Broker may refuse to enter into or may terminate a provider agreement if it determines that the provider did not fully and accurately make any disclosure as required in this section.

### Disclosures Made by Providers to the Broker

Before the Broker enters into or renews a provider agreement, or at any time upon written request by EOHHS, the Broker shall disclose to EOHHS in writing the identity of any person who:

- A. Has been convicted of a criminal offense as described in Sections 1128(a) and 1182(b) (1), (2), or (3) of the Social Security Act
- B. Has had civil money penalties or assessments imposed under Section 1129A of the Social Security Act; or

- C. Has been excluded from participation in Medicare, Medicaid, or any Federal or State health care programs and such a person has:
  - 1) A direct or indirect ownership interest of five (5) percent or more in the entity;
  - 2) Is the owner of a whole or part interest in any mortgage, deed of trust, note for other obligation secured (in whole or in part) by the entity or any of the property assets thereof, in which whole or part interest is equal to or exceed five (5) percent of the total property and assets of the entity;
  - 3) Is an officer or director of the entity, if the entity is organized as a corporation;
  - 4) Is partner in the entity, if the entity is organized as a partnership;
  - 5) Is an agent of the entity; or
  - 6) Is a managing employee, that is (including a general manager, business manager, administrator or director) who exercises operational or managerial control over the entity, or who directly or indirectly conducts the day-to-day operations of the entity or part thereof, or directly or indirectly conducts the day-to-day operations of the entity or part thereof, or was formerly described in paragraph (a)(1)(ii)(A) of this section, but is no longer so described because of a transfer of ownership or control interest to an immediate family recipient or a recipient of the person's household as defined in paragraph (a) (2) of this section, in anticipation of or following a conviction, assessment of a CMP, or imposition of an exclusion.

For the purposes of this section, the following terms (agent, immediate family recipient, indirect ownership interest, recipient of household, and ownership interest) shall have the meaning specified in 42 CFR 1001.1001.

Agent means any person who has express or implied authority to obligate or act on behalf of an entity.

Immediate family recipient means a person's husband or wife; natural or adoptive parent; child or sibling; stepparent, stepchild, stepbrother, or stepsister; father-in-law, mother-in-law, daughter-in-law, son-in-law, brother-in-law, or sister-in-law; grandparent or grandchild; or spouse of a grandparent or grandchild.

Indirect ownership interest includes an ownership interest through any other entities that ultimately have an ownership interest in the entity in issue. (For example, an individual has a ten (10) percent ownership interest in an entity at issue if he or she has a twenty (20) percent ownership interest in a corporation that wholly owns a subsidiary that is a fifty (50) percent owner of the entity in issue.)

Recipient of household means, with respect to a person, any individual with whom they are sharing a common abode as part of a single-family unit, including domestic employees and others who live together as a family unit. A roomer or boarder is not considered a recipient of household. Ownership interest means an interest in:

- i. The capital, the stock, or the profits of the entity, or
- ii. Any mortgage, deed, trust or note, or other obligation secured in whole or party by the property or assets of the entity.

The Broker must notify EOHHS in writing within ten (10) business days of the receipt of any disclosures which have been made to the Broker.

The Broker must promptly notify EOHHS in writing within ten (10) business days of any action that it takes to deny a TP's application for enrollment or participation (e.g., a request for initial credentialing or for re-credentialing) when the denial action is based on the Broker's concern about Medicaid program integrity or quality).

The Broker must also promptly notify EOHHS of any action that it takes to limit the ability of an individual or entity to participate in its program, regardless of what such an action is called, when this action is based on the Broker's concern about Medicaid program integrity or quality. This includes, but is not limited to, suspension actions and settlement agreements and situations where an individual or entity voluntarily withdraws from the program to avoid a formal sanction.

The Broker may refuse to enter into or renew an agreement with a provider if any person who has an ownership or control interest in the provider, or who is an agent or managing employee of the provider, has been convicted of a criminal offense related to that person's involvement in any Federal health care program.

The Broker may refuse to enter into or may terminate a provider agreement if it determines that the provider did not fully and accurately make any disclosure as required in this section.

## Compliance with all Rhode Island Regulations

The Broker agrees to comply with all applicable RI State laws and regulations including but not limited to:

 2019 Enacted Budget: The Broker's capitation rates include dollars allocated from the SFY 2019 Enacted Budget.

## Compliance with all Federal Regulations

The Broker agrees to comply with all applicable Federal laws and regulations.

#### GRIEVANCE AND APPEALS

EOHHS has established a Grievance and Appeals function through which recipients can seek redress against the Broker. The grievance system includes a grievance process, an appeals process, and access to the State's Fair Hearing system. For its part, Broker shall have written policies and procedures conforming to EOHHS' requirements for resolving recipient complaints and for processing grievances, when requested by the recipient or when the time allotted for complaint resolution expires. Such procedures shall not be applicable to any disputes that may arise between Broker and provider regarding the terms, conditions, or termination or any other matter arising under a participation agreement or regarding any payment or other issues relating to providers. Broker agrees to participate in State Fair Hearings upon request.

Broker's policies and procedures for processing grievances must permit a recipient, TP or authorized representative, acting on behalf of the recipient and with the recipient's written consent, to file a grievance with the Broker at any time. The timeframe for resolution is 90 calendar days from receipt of the grievance.