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Owner Stephanie Clark:

Director,

Compliance & ACO Compliance

Officer

Area Compliance

Applicability Privia Health and

All Markets

ACO Corrective and/or Disciplinary Action and Programmatic Corrections

1. Purpose:

Provide a statement of the ACO's policy governing corrective and disciplinary actions taken in response to identified non-compliance,

as well as programmatic corrective actions, and procedures to ensure that the ACO's practices are consistent with its stated policies.

2. Scope:

This policy applies to all Privia Quality Networks, all PQN's, CMG ACO and all ACO Related Individuals as defined in this policy.

3. Definitions:

- ACO Related Individual ACO officers, directors, employees, ACO Participant, ACO Provider/ Supplier, or any other individual or entity providing functions or services related to ACO Activities.
- Code of Conduct The Privia Health Group, Inc. Code of Conduct which has also been adopted as the Code of Conduct for the ACO.

4. Policy:

The ACO shall take appropriate and consistent corrective action to address both programmatic deficiencies in its Compliance Program and instances of noncompliance by ACO Related Individuals. Any

individual violating the ACO's Compliance Plan, Policies and Procedures, Code of Conduct, applicable laws or regulations, or other applicable ACO requirements shall be subject to discipline, as relevant and appropriate, up to and including termination.

5. Procedure:

- A. Programmatic Corrective Actions. The ACO shall take appropriate action to correct internal operational or programmatic deficiencies that are identified by the ACO Compliance Officer.
 - 1. If the violation involves an ongoing activity or practice, then (a) the activity or practice shall be stopped, and (b) legal counsel shall be notified of the violation.
 - 2. If the same or a similar violation could or might be prevented in the future by making changes to the ACO's Policies and Procedures, Code of Conduct, or otherwise, such changes shall be considered, developed, instituted, and promptly communicated to all affected individuals.
 - 3. In developing and implementing programmatic corrective actions, the ACO and/or the ACO's Governing Body or appropriate sub-committee may consider and employ any other appropriate corrective action that may be needed.
- B. Corrective Action and/or Disciplinary Action.
 - Any ACO Related Individual who has violated any applicable laws or regulation, the ACO's Compliance Plan, Code of Conduct, Policies and Procedures, and/or other applicable ACO requirements shall be subject to a corrective action plan and/or disciplined, as appropriate.
 - 2. The ACO also may take corrective action and/or disciplinary action against individuals who fail to detect or report non-compliance on the part of individuals under their supervision. Failure to detect non-compliance means that the individual knew or reasonably should have known about the non-compliance, but failed to identify the relevant conduct as potentially violative of applicable laws or regulations, the ACO's Compliance Plan, Code of Conduct, Policies or Procedures and /or other applicable ACO requirements.
 - 3. Corrective and/or disciplinary action of ACO Related Individuals may take one or more of the following forms, including, but not limited to:
 - a. Imposition of a corrective action plan, which may include training, education, and other remedial measures;
 - b. Verbal warning;
 - c. Written warning;
 - d. Probation;
 - e. Suspension with pay;
 - f. Suspension without pay; and
 - g. Termination of employment, participation, or contract with the ACO.
 - 4. When corrective and/or disciplinary action is appropriate, the severity of the action will depend on a variety of factors, including, but not limited to:

- a. The nature and severity of the violation;
- b. Whether the violation was committed intentionally, recklessly, negligently, or accidentally;
- c. Whether the individual had previously violated any laws, regulations, the ACO's Compliance Plan, Code of Conduct, or Policies and Procedures;
- d. Whether the individual self-reported his or her non-compliance; and
- e. Whether (and the extent to which) the individual cooperated with the ACO in connection with its investigation of the non-compliance.
- 5. The determination of the appropriate disciplinary action for compliance or legal obligations will be made by the ACO Compliance Officer, in consultation with the Chief Compliance Officer, ACO Executive, the Governing Body or appropriate subcommittee and the individual's supervisor, as appropriate.

C. Disclosure; Restitution.

- If the ACO Compliance Officer believes that there has been a probable violation of applicable laws or regulations, the ACO's Compliance Plan, Code of Conduct, Policies and Procedures, or other applicable ACO requirements, the ACO Compliance Officer will consult with the Chief Compliance Officer and legal counsel who will determine, along with the ACO whether the Company should:
 - a. Make a report to appropriate government authorities including making a report to HHS-OIG; and/or
 - b. Make a payment of any kind to the government or other entity or person if a program overpayment has been determined; and/or
 - Perform other types of remedial action including disciplinary action. In making such a determination, the ACO may consult with counsel, as appropriate.
- D. Continual Monitoring and Follow-up Audits. Any issue for which corrective action is taken, may be added to the risk assessment and/or work plan for targeted monitoring and/or review in future audits. Pertinent information learned during investigations will be incorporated into training and education, as appropriate.
- E. Documentation. The ACO shall document any corrective and/or disciplinary actions taken pursuant to this policy and maintain such documentation, which may include electronic documentation, in the Compliance Program files consistent with its document retention policies but, in no case, for a period of less than ten years.

Approval Signatures

Step Description Approver Date

Chief Audit & Compliance Officer Approval ACO Compliance Leadership Approval #1 Dana Fields: Chief Audit & 01/2024
Compliance Officer

Stephanie Carpenter: Director of Government Programs

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