

**TITLE: COMPLIANCE EDUCATION AND TRAINING**

**PURPOSE:** To formalize the requirements for compliance education and training for all Harris Health System Workforce members.

### **POLICY STATEMENT:**

Harris Health System (Harris Health) is committed to continuously educating and training its workforce on Harris Health's compliance program.

### **POLICY ELABORATION:**

#### **I. DEFINITION:**

**WORKFORCE:** For purposes of this policy only Workforce is defined as Harris Health System Board of Trustees, employees, medical staff, trainees, and volunteers.

#### **II. INTRODUCTION TO COMPLIANCE**

- A. All new Workforce members must be introduced to the following prior to beginning work at Harris Health.
1. Harris Health's Corporate Compliance Program ("Compliance Program," including its purpose, objectives and the Corporate Compliance Officer (CCO);
  2. Harris Health's Code of Conduct (Code) and explain how each standard applies to Harris Health's employees; and
  3. What constitutes healthcare fraud, waste, and abuse and how to report suspected or known cases of fraud, waste, and abuse.
- B. The education material and content as well as the method of training related to the Introduction to Compliance will be reviewed annually to ensure that the information is current and takes into account any information discovered during audits and investigations, guidance from the Centers for Medicare and Medicaid Services, and any other applicable agency.

### III. ANNUAL EDUCATION AND TRAINING

#### A. Workforce Members:

1. All Workforce members **must** complete Harris Health's annual compliance education and training. The annual compliance education and training at a minimum will:
  - a. Review Harris Health's Code and explain the purpose of the Code;
  - b. Describe Harris Health's Corporate Compliance program, including its purpose, structure, and goals;
  - c. Describe Workforce members' reporting obligations;
  - d. Explain how Workforce members may report concerns, allegations, and suspected wrongdoing anonymously through the Compliance Hotline;
  - e. Explain Harris Health's Non-Retaliation policy; and
  - f. Explain the differences between fraud, waste, and abuse.
2. The education material and content as well as the method of training for Workforce members' annual education will be reviewed annually to ensure that the information is current and takes into account any information discovered during audits and investigations, guidance from the Centers for Medicare and Medicaid Services and any other applicable agency.

#### B. Contractors & Vendors:

Contractors and vendors are expected to review and follow the below listed compliance education materials that are posted on Harris Health's "Vendor Relations" website:

1. Harris Health System Policy and Procedures 3.31 Preventing and Reporting Fraud, Abuse, and Wrongdoing;
2. Harris Health System Policy and Procedures 3.58 Non-Retaliation for Reporting Fraud, Abuse, and Wrongdoing;
3. Harris Health System Code of Conduct; and
4. Harris Health System General Compliance Education Slideshow.

## POLICY AND REGULATIONS MANUAL

### C. Board of Trustees:

The CCO is responsible for ensuring that the Board of Trustees receives annual education and training on the Compliance Program, including the Code, and updates on the regulatory environment. The Executive Corporate Compliance Committee (ECCC) will review Board training material.

## IV. ADDITIONAL COMPLIANCE TRAINING

A. In addition to General Orientation and the annual compliance training and education, Workforce members who provide patient care items or services or who perform billing, coding, or claims submission functions on behalf of Harris Health or have responsibilities identified in compliance risk areas are required to receive more detailed education relating to their responsibilities. The additional training shall address:

1. The Federal health care program requirements regarding the accurate coding and submission of claims;
2. Policies, procedures, and other requirements applicable to the documentation of medical records;
3. Applicable reimbursement statutes, regulations, and program requirements and directives;
4. The legal sanctions for violations of Federal health care program requirements;
5. Examples of proper and improper claims submission practices; and
6. Proper procedures for processing Medicare secondary payer claims.

## III. COMPLIANCE TRAINING DOCUMENTATION GUIDELINES

- A. Records regarding completed compliance training (e.g., General Orientation, Annual, etc.) are documented and maintained pursuant to Harris Health's Record Retention Policy.
- B. Sign-in sheets will be used in all face-to-face training sessions to document Workforce members' attendance and receipt of compliance training. All Workforce members must sign in at the time they receive their training. Audit logs must be maintained for computer based training.

### IV. RESPONSIBILITIES

- A. The CCO is responsible for developing and monitoring the compliance education curriculum and ensuring that general compliance training and orientation meets the policy standards on this subject.
- B. The CCO is responsible for coordinating compliance training and education with management and the ECCC to ensure that specialized compliance education is developed and delivered in areas identified as having high compliance risks.
- C. The CCO is responsible for including the compliance training and education program efforts into the Office of Corporate Compliance’s annual work plan and submitting periodic reports to the ECCC and the Board of Trustees on all education and training efforts related to the Corporate Compliance Program.
- D. The Office of Corporate Compliance will make best efforts to coordinate with Medical Staff Services to make available compliance training materials for physicians.

### REFERENCES/BIBLIOGRAPHY:

Harris Health System Policy and Procedures 8.03 Record Retention.

### OFFICE OF PRIMARY RESPONSIBILITY:

Harris Health System Office of Corporate Compliance.

### REVIEW/REVISION HISTORY:

Effective Date	Version# (If Applicable)	Review or Revision Date (Indicate Reviewed or Revised)	Reviewed or Approved by: (If Board of Managers Approved, include Board Motion#)
		Reviewed 01/03/2008	Vice President of Corporate Compliance
		Approved 01/23/2008	Executive Corporate Compliance Committee
		Approved 02/05/2008	HCHD Policy Review Committee
02/28/2008			HCHD Board of Managers (Board Motion 08.2-172)
		Approved 02/05/2008	HCHD Policy Review Committee
	2.0	08/19/2019 Expedited Executive Approval via Rapid Cycle	CEO
		Required Post-Approval Rapid Cycle Review Complete 08/11/2020	Structure and Organizational Standards Committee