GENERAL COMPLIANCE TRAINING 2018



Objectives

- Describe why healthcare is highly regulated industry
- Describe the Corporate Compliance Program and its role in promoting legal and ethical daily activities
- Demonstrate knowledge of the Code of Conduct
- Explain how individuals are protected when they report wrongdoings

Healthcare Regulatory Environment

Health Care Highly Regulated

- Most heavily regulated industry in the United States
- Is regulated because of the potential for fraud and abuse.
- Entities regulating include:

Federal

- Department of Health and Human Services (HHS)
- Centers for Medicare & Medicaid Services (CMS)
- Office of Inspector General (OIG)
- Intermediaries, Carriers, DMERCs, ZPICs and MACs under contract with CMS

State

- Survey and certification
- Attorney General
- Licensing boards

Others

- Private Insurance Companies
- Peer Review Organizations
- DNV Survey Det Norske Veritas

Major Healthcare Laws

- Emergency Medical Treatment and Active Labor Act (EMTALA)
- Deficit Reduction Act of 2005
- Federal and State False Claims Act
- Anti-kickback Statute
- Stark Law
- Fraud and Enforcement Recovery Act of 2009 (FERA)
- American Recovery and Reinvestment Act of 2009 (ARRA) which includes the HITECH Act
- Health Insurance Portability and Accountability Act (HIPAA)
- Patient Protection and Affordable Care Act (PPACA)

What are Fraud and Abuse?

Fraud

- When someone knowingly cheats the government for money or property. In health care, the most common type of false claim is billing for services that were not provided to the patient.
- Knowingly submitting a false claim to a federal program is liable for \$5,500 to \$11,000 plus 3 times damages sustained.

Abuse

 Practices that directly or indirectly result in unnecessary costs or improper payments for services which fail to meet recognized professional standards of care

When Fraud is Detected

- Improper payments must be paid back
- Providers/companies barred from program
 - Can't bill Medicare, Medicaid or CHIP
- Fines are levied
- Law enforcement gets involved
- Possible Arrests and convictions

Test Your Knowledge

- Practice Questions are included in each section and will let you test your knowledge.
- All questions are either True/False or Multiple Choice. Only one option is correct.

Question

Which one of the following government entities enforces laws in healthcare?

- A. Office of Inspector General (OIG)
- B. Internal Revenue Services (IRS)
- C. Government Accountability Office (GAO)
- D. Central Intelligence Agency (CIA)

Correct Answer

Which one of the following government entities enforces laws in health care?

A. Office of Inspector General (OIG)

The OIG of the Department of U.S. Department of Health and Human Services is a leading federal enforcement agency for health care. It protects the integrity of government healthcare programs as well as the health and welfare of patients.

Question

Purposely billing for services that were not provided is considered which of the following?

- A. Abuse
- B. Neglect
- C. Fraud
- D. None of the above

Correct Answer

Purposely billing for services that were not provided is considered which of the following?

C. Fraud

Fraud is an intentional misrepresentation of the truth that results in some unauthorized benefit; therefore, deliberately billing for services or items not provided is fraud.

Corporate Compliance Program

Corporate Compliance Officer Carolynn Jones, JD



Importance of Compliance Program

- Health care fraud is a well-known problem
- Health care organizations increasingly face criminal and civil exposure due to various factors:
 - Increased enforcement of complex federal regulations
 - Improper actions taken by individuals who are tempted to cut corners
- Exposure to criminal, civil, and administrative penalties can be substantially reduced with a compliance program.
- Compliance program is an essential component of leniency in the sentencing of organizations under the United States Sentencing Guidelines.

Compliance Is Everyone's Responsibility

Responsibility of Employees

- Understand how the Corporate Compliance Program applies to your job and ask questions when necessary
- Report any suspected violations
- Participate actively in compliance activities

Responsibility of Supervisors and Managers

- Build and maintain a culture of compliance
- Prevent, detect, and respond to compliance problems
- Prevent retaliation or reprisals against employees who report violations

Harris Health Compliance Program

- What is it?
 - Program to encourage ethical conduct in daily operations and a commitment to compliance with the law.
 - Designed to:
 - Prevent any accidental and intentional violations of laws
 - Detect violations if they occur
 - Correct any future noncompliance

Corporate Compliance Program Structure



Seven Compliance Program Elements

1. Code of Conduct

provides guidelines for conducting daily activities in legal and ethical manner

2. Corporate Compliance Officer

develops, implements, operates, and monitors the program

3. Policies and Procedures

describe how Harris Health will operate in a compliant and ethical manner

4. Education and Training

 ensures all employees, medical staff and board can perform duties in compliance with rules and regulations

Seven Compliance Program Elements

5. Hotline and Communication

provides ability to report suspected wrongdoing without fear of retaliation

6. Enforcement

ensure appropriate discipline is imposed for noncompliance

7. Auditing and Monitoring

 provides an ongoing review process related to risk areas throughout Harris Health

Test Your Knowledge

- Practice Questions in each section will let you test your knowledge.
- All questions are either True/False or Multiple Choice. Only one option is the correct one.

Question

Which of the following best describes the major goal of our Corporate Compliance Program?

- A. To plan facility construction projects
- B. To prevent, detect, and correct accidental and intentional violation of laws, regulations, and policies
- C. To enhance the marketing of our services

Correct Answer

Which of the following best describes the major goal of our Corporate Compliance Program?

B. To prevent, detect, and correct accidental and intentional violations of law.

Our Corporate Compliance Program was designed to prevent accidental and intentional violations of laws, regulations, and policies; to detect violations if they occur; and to prevent future noncompliance.

Question

Which of the following is NOT an element of our Corporate Compliance Program?

- A. Education and training
- B. Annual report to the American Medical Association (AMA)
- C. A hotline reporting system
- D. Policies and procedures

Correct Answer

Which of the following is NOT an element of our Corporate Compliance Program?

B. Annual reports to the American Medical Association (AMA)

Reports to the AMA are not a basic element. Although compliance programs may have various characteristics, they typically contain seven basic elements seen in the the program.

Question

What is the responsibility of every employee?

- A. Stay at least one hour beyond the normal shift
- B. Report suspected violations of compliance
- C. Present a violations report to the Compliance Department at least once every year
- D. None of the above

Correct Answer

What is the responsibility of every employee?

B. Report suspected violations of compliance.

It is the duty of every employee to report suspected violations. We also expect all employees to be familiar with our Corporate Compliance Program, and not tolerate violations of laws, regulations, or Harris Health standards, policies, or procedures.

HARRIS HEALTH Code of Conduct

Purpose of Code of Conduct

- Provides the principal guidelines to conduct daily business activities ethically and legally.
- Serves as "Constitution" for our Corporate Compliance Program to ensure that we meet our compliance goals.
- Consistent with the Mission, Vision and Value Statements

Code of Conduct Applies to Everyone

- Must be observed by <u>everyone</u>, including:
 - Employees
 - Volunteers
 - Administrators
 - Contractors
 - Board of Managers
 - Medical Staff and Affiliated Medical School Personnel

8 Standards of Behavior in Code of Conduct

- 1. Quality of Care
- 2. Compliance with Laws and Regulations
- 3. Human Resources
- 4. Billing and Coding
- 5. Federal and State False Claims Act
- Protection and Use of Information, Property and Assets
- 7. Conflicts of Interest
- 8. Health and Safety

1. Quality of Care

- Have the responsibility to provide appropriate, respectful, and professional treatment to all our customers, including:
 - Patients
 - Families
 - Physicians and Medical Staff
 - Co-workers
 - Any outside contacts
- Good documentation helps ensure quality patient care

2. Compliance with Laws and Regulations

- Will conduct all business and operations in compliance with applicable Federal and state laws and regulations and Harris Health policies
- Report any violations promptly to management, the Corporate Compliance Officer or the Compliance Hotline

3. Human Resources

- Recognize that our employees are our most valuable assets
- Committed to provide a work environment that is fair, consistent, equitable, free from violence, hostility, and harassment; and in which everyone is treated with respect
- Forbid any behaviors that violate this standard and any related policies and procedures

4. Billing and Coding

- Accurate coding and billing are critical
- Only bill for services or items actually provided and documented in the medical record
- Fraudulent billing may result in stiff penalties not only for the organization, but individuals as well.

5. Federal and State False Claims Act

- Violates Federal and state laws to submit claims for payment with false and untrue information.
- Reporters of violations protected under Qui Tam provisions (whistleblower rights).
- Penalties for Federal FCA violations include civil penalties between \$5,500 and \$11,000 per violation, <u>plus</u> three times the amount of damages.

6. Protection and Use of Information, Property and Assets

- Take steps to protect patient privacy
- Use Harris Health property type only as authorized
- Maintain all patient records and protected health information in accordance with laws and Harris Health record retention policies

7. Conflicts of Interest

- Expect employees, medical staff members, volunteers and vendors to exercise attention, good judgment and prudence in their relationships, obligations and financial interests so that they do not conflict with the interests of Harris Health or the performance of their duties
- Expect and encourage reporting of any situation involving potential conflicts of interest

8. Health and Safety

- Must comply with environmental, health, and safety laws and regulations
- Drugs must be safely stored and spills and accidents promptly reported
- Unauthorized weapons are strictly prohibited
- May be severe penalties for any violations of the laws, including the costs of any clean up

Test Your Knowledge

How can Harris Health ensure that its billing and coding practices comply with all laws, regulations, guidelines, policies?

- A. Code and bill only for services actually provided
- B. Analyze payments systematically and reconcile any overpayments
- C. Ensure all claims are accurate and correctly document the services rendered
- D. All of the above

How can we ensure that its billing and coding practices comply with all federal and state laws, regulations, guidelines, policies?

D. All of the above.

To ensure compliance with all applicable laws, regulations, and Harris Health policies, we will only bill for services and items provided and documented in the patients' medical records. All claims will be accurate and correctly document the services ordered and performed. We will periodically review our billing & coding practices and policies, including software edits.

Which of following situations would most likely constitute a conflict of interest?

- A. Reporting an eligibility discrepancy to your supervisor
- B. Participating in a government audit
- C. Making a decision required as part of your duties that could be influenced by a financial or other gain to you or a family relative

Which of following situations would most likely constitute a conflict of interest?

C. Making a decision or judgment required as part of your duties that could be influenced by a financial or other interest.

A conflict of interest may arise when your own private interests conflict with your Harris Health duties. It is important to avoid any activities that may influence or appear to influence your ability to render objective decisions in the course of your job responsibilities. All decisions should be based on the needs of our patients, Harris Health and community.

Which of the following is not a potential false claims violation?

- A. Knowingly charging for a service not covered by Medicare
- B. Unintentionally billing for services at a higher rate level than necessary once
- C. Furnishing medically unnecessary services

Which of the following is not a potential false claims violation?

B. Unintentionally billing for services at a higher rate level than necessary once.

Knowledge or intent is required before a potential false claims violation can be alleged. Here a bill was submitted unintentionally, it would not be a potential false claims violation. However, willfully neglecting known billing errors gives rise to potential false claims.

Who is responsible for compliance with all laws, regulations, and policies?

- A. Board of Managers
- B. Corporate Compliance Officer
- C. Employees and Medical Staff
- D. All of the above

Who is responsible for compliance with all laws, regulations, and policies?

D. All of the above

Responsibility for compliance resides with everyone, including our Board of Managers, employees, officers, medical staff, volunteers, contractors, vendors, and agents. All Harris Health activities will be conducted in compliance with all applicable laws, regulations, and Harris Health policies and procedures.

Which of following is considered a proper use of the Harris Health email system and Internet access?

- A. Announcing an upcoming staff meeting
- B. Announcing an upcoming garage sale
- C. Downloading software from the Internet
- D. Forwarding chain letters to co-workers

Which of the following is considered a proper use of the Harris Health email system and Internet access?

A. Announcing an upcoming staff meeting

The email system, intranet, and internet access are intended for business use. The computer network is property of Harris Health. Announcements of staff meetings would be an appropriate use of the email system.

Reporting Process and Non-Retaliation

Reporting Encouraged

- Committed to doing the right thing. If you know or think you know something is "not right" you are expected to report violations of the law or the Harris Health Code of Conduct in good faith.
 - "In good faith" means you actually believe the information reported is true.
- Will not retaliate or discriminate because an issue is disclosed.
- Two Harris Health policies:
 - Deficit Reduction Act
 - Reporting Fraud, Abuse, Waste, and Wrongdoing and Non-Retaliation

When In Doubt – Report!

- The following words and phrases are warning signs about potential problems:
 - "Well, maybe just this once."
 - "Everyone does it."
 - "No one will ever know."
 - "Shred that document no problem."
 - "No one will get hurt."

Ask Yourself the Following Questions

- The following "quick quiz" will help you determine what to do next:
 - "Does this break a law, regulation, policy, or our Code of Conduct?"
 - "How will I feel about myself afterwards?"
 - "What would my family, friends, our physicians, or patients think?"
 - "How would this look if it were in the newspaper tomorrow?"
 - "Am I being fair and honest?"

4-Step Reporting Process

- 1. Discuss the question or concern with your supervisor.
- 2. Contact a member of the management team, if you are not comfortable contacting your supervisor or feel that you did not receive an adequate response.
- 3. Contact the Compliance Officer at 713-566-6948.
- 4. Call the confidential Compliance Hotline at 1-800-500-0333, or write to PO BOX 300033, HOUSTON, TX 77054, if you wish to remain anonymous.

Test Your Knowledge

Harris Health has a policy that protects individuals who report suspected violations of the Code of Conduct, policies and procedures, or law.

- A. True
- B. False

Harris Health has a policy that protects individuals who report suspected violations of the Code of Conduct, policies and procedures, or law.

A. True

Harris Health has a non-retaliation policy and will not tolerate any retaliation against an employee or Medical Staff member, who in good faith reports a suspected violation. "In good faith" means an employee actually believes that the information reported is true.

How can one promptly report a potential violation of law, regulation, or policy?

- A. Contact the direct supervisor.
- B. Contact the Compliance Officer.
- C. Call the Compliance Hotline.
- D. All of the above.

How could one promptly report a potential violation of law, regulation, or policy?

D. All of the above.

In accordance with the Code of Conduct and 4-step reporting process, we encourage reporting up the chain of command. Employees should promptly report any violations or concerns to their supervisor or management, the Compliance Officer, or the Compliance Hotline.

The *Qui Tam* provisions for whistleblower rights only apply to the Federal False Claims Act (FCA).

- A. True
- B. False

The *Qui Tam* provisions for whistleblower rights only apply to the Federal False Claims Act (FCA).

B. False

The Qui Tam provisions protect whistleblowers under <u>both</u> the Federal and State False Claims Acts as well as the Fraud and Enforcement Recovery Act of 2009. It allows individuals to file lawsuits under the FCA on behalf of the Federal Government. Accordingly, we will not engage in retaliatory conduct against any employees who exercise their rights under the Qui Tam provisions.



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