

Contracted Provider Education and Training Module

Objectives

- At the end of this training, you will understand:
 - Laws & regulations governing Immanuel's Compliance Program
 - Immanuel's Code of Conduct
 - Roles and Responsibilities Related to HIPAA
 - Recognize Fraud, Waste, and Abuse (FWA) as part of Immanuel's Compliance Program
 - How to Report Potential Violations

Corporate Compliance Program

Corporate Compliance Program

- The U.S. Department of Health and Human Services' Office of the Inspector General (OIG) has stated that health care providers should have a compliance program to prevent fraud, waste, and abuse.
- As a recipient of federal & state healthcare dollars, Immanuel has developed a compliance program to demonstrate its commitment to complying with all applicable laws and actively preventing fraud and abuse.



Goals of the Compliance Program

- Foster an organization-wide understanding of and commitment to compliance;
- Assure that all employees, members of the Boards of Directors, vendors, volunteers, students, and any individual or entity who does business on behalf of Immanuel, know our standards and procedures in order to detect and prevent illegal and improper behavior.



7 Elements of Immanuel's Corporate Compliance Program

1. Appointment of Compliance Officer and Compliance Committee
2. Written Plans, Policies, Procedures, and Code of Conduct
3. Training and Education
4. Monitoring and Auditing
5. Reporting Process
6. Enforcement and Disciplinary Standards
7. Ongoing Evaluation of the Compliance Program and Plans

Corporate Compliance Officer and Corporate Compliance Committee

- Responsibilities and Oversight:
 - Board of Directors: responsible for the adoption of the Immanuel and Subsidiaries' Corporate Compliance Program.
 - Corporate Compliance Officer: Tracy Durbin
 - In charge of developing, implementing, operating, and monitoring the Immanuel and Subsidiaries' Corporate Compliance Program
 - Acts as Chair of the Corporate Compliance Committee.
 - Corporate Compliance Committee: employees, including management, who assist in the design, implementation, and operation of the Compliance Program
 - Members act as advisors to the Corporate Compliance Officer
 - Provide expertise and resources to carry out compliance initiatives

Code of Conduct

Written Plans, Policies, Procedures, and Code of Conduct

- Immanuel's **Code of Conduct** outlines its commitment to comply with all federal and state laws.
- The **Code of Conduct** is distributed to and applies to everyone at Immanuel including: all employees (including temporary and contracted workers), members of the Boards of Directors, vendors, volunteers, students, and any individual who does business on behalf of Immanuel.
- Everyone is required to acknowledge their willingness to abide by the **Code of Conduct** upon employment or affiliation with Immanuel, and annually thereafter.

Written Plans, Policies, Procedures, and Code of Conduct

- Immanuel's **Code of Conduct** contains:
 - Immanuel's Mission, Vision, CHRIST Promises, and ethical values
 - General statements about Immanuel's policies related to specific compliance policies and procedures
 - How to report any perceived or actual violations of the Code of Conduct

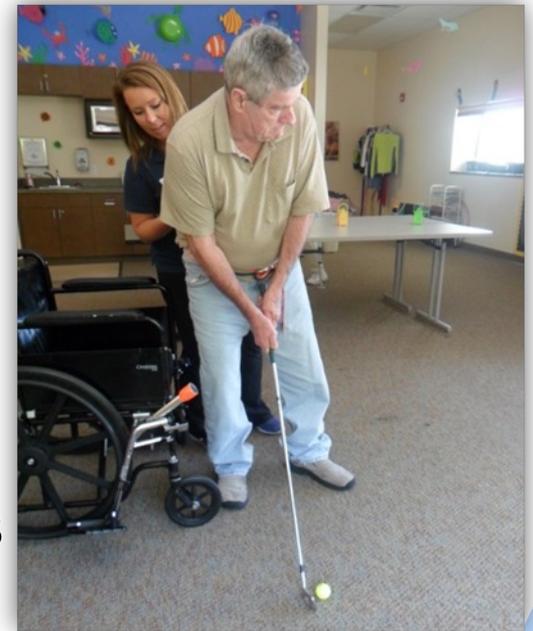


Vision
Mission
& Values

Written Plans, Policies, Procedures, and Code of Conduct

Code of Conduct relevant policies:

- Quality of Care and Services to Residents/Participants
- Confidentiality of Resident/Participant Health Information
- Confidentiality of Business Information
- Marketing and Advertising
- Harassment-Free Workplace
- Discrimination-Free Workplace
- Drug and Alcohol Use
- Gift, Gratuities, and Business Courtesies
- Conflicts of Interest



Written Plans, Policies, Procedures, and Code of Conduct

Code of Conduct relevant policies:

- Financial Reporting
- Kickbacks, Referrals, and Bribes
- Fraud, Waste, and Abuse
- Coding and Billing Integrity
- Health, Safety, and Environmental Laws
- Property, Equipment, and Supplies
- Record Retention
- Non-Retaliation
- Reporting and Investigation



Written Plans, Policies, Procedures, and Code of Conduct

Background Check Policy:

- Immanuel is required to investigate the background of its employees, contractors, vendors, volunteers, students, and members of its Board of Directors to ensure that they have not been excluded from participating in federal or state health care programs.
- Monthly: Immanuel checks the Office of Inspector General's (OIG) database to ensure it has not employed an individual or is affiliated with an entity that has been excluded.
- Consequences for employing or affiliating with an excluded person or entity are very serious. Immanuel is committed to ensuring that it maintains relationships with individuals and entities that have not been excluded.

Training Monitoring Auditing

Training and Education

- Employees, members of the Board of Directors, volunteers, students, and any other individuals doing work on behalf of Immanuel are required to be trained within two (2) weeks of employment or affiliation on the Compliance Program.
- Annually, employees are required to complete Compliance Program training and agree to continue abiding by Immanuel's **Code of Conduct**



Monitoring and Auditing

- Immanuel is required to undertake monitoring and auditing to test and confirm compliance with rules and regulations, contractual agreements, and internal policies and procedures.
- What is Monitoring?
 - Monitoring is an intermittent and proactive approach to identify problems at an early stage
- What is Auditing?
 - Auditing is a formal review of compliance with a particular set of standards used as base measures.
- Monitoring and Auditing work plans are overseen by the Corporate Compliance Officer and Corporate Compliance Committee

HIPAA

HIPAA

Using & Disclosing PHI

- PHI can be shared for payment, treatment or healthcare operational purposes without authorization from the resident/participant
- Answer these 5 questions before sharing a resident/participant's PHI
 - Question 1: Who is making the request?
 - Question 2: What documentation is being requested?
 - Question 3: Is documentation/verification needed before disclosing information to the person?
 - Question 4: How many days do I have to respond to the request?
 - Question 5: Do I need to make an accounting of the disclosure?

E-mail Security

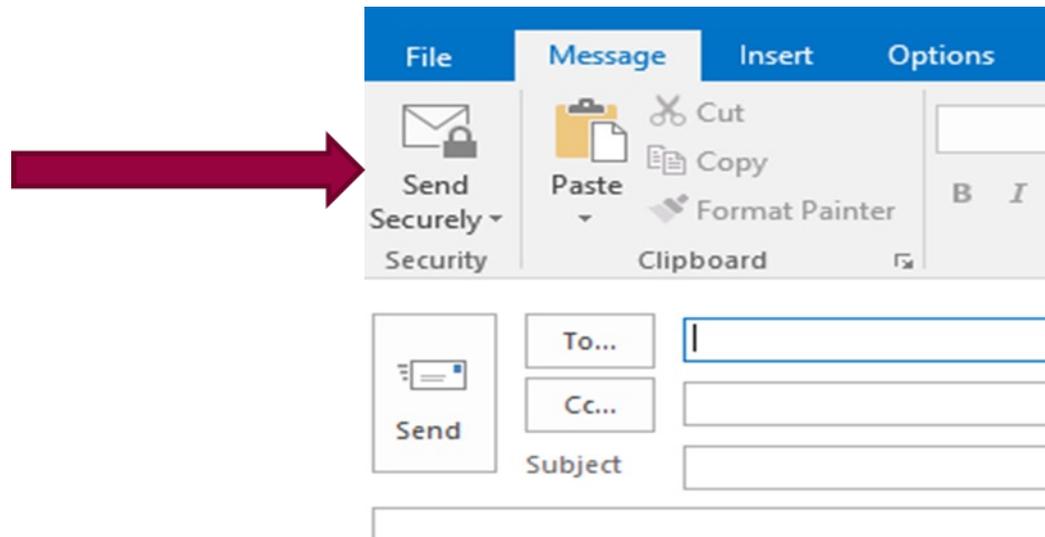
- E-mail is like a postcard. E-mail may potentially be viewed in transit by many individuals, since it passes through other systems en-route to its final destination.
- Although risks of a single piece of e-mail are small given the volume of e-mail traffic, **e-mails containing e-PHI need a higher level of security and careful addressing.**



E-mail Security/Encryption

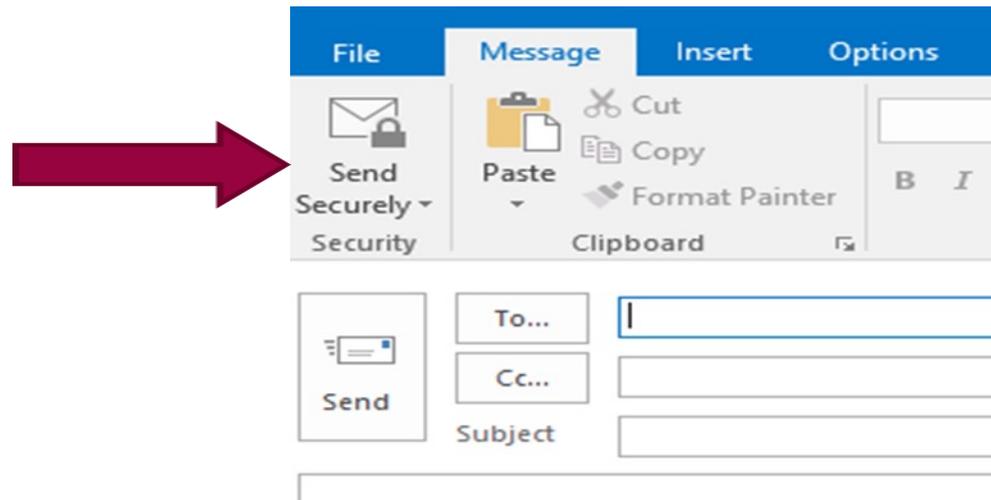
Send Securely!

Whenever you send e-mail communication with e-PHI to a party outside of Immanuel, you are required to **encrypt** the e-mail before sending it. This ensures that the e-mail maintains its integrity and is not accessed or viewed by unauthorized persons.



E-mail Security/Encryption

- If you receive an e-mail from an individual outside of Immanuel (i.e. provider, attorney, family member) and the e-mail was not encrypted, you should not respond to it without first encrypting your response by selecting the encrypt button.



Faxes and Copiers

- Always use an Immanuel fax cover sheet.
- The fax cover sheet should contain the following information:
 1. Date and time of the fax
 2. Sender's name, address, telephone number and fax number
 3. The authorized recipient's name, telephone and fax number
 4. Number of pages transmitted
 5. Information regarding verification of receipt of the fax
 6. Warning regarding message is intended for the specific person and if received in error to notify the sender
 7. **NOTE:** No PHI should be contained on the cover sheet (e.g. name of resident/participant)

Faxes and Copiers

- Designate specific employees to empty fax trays and deliver the contents to responsible parties on a regular basis
- Faxes with PHI should be deposited in a secure, confidential place when they are delivered i.e. not left in an in-box that a passerby can see
- If you print PHI or make copies, immediately pick up your documents. Do not leave PHI on the copier for others to see
- Confirm the accuracy of fax numbers by calling the intended recipient to double check the number, verify the security of their machine, notify them that your fax is on the way, and request verification of its receipt. Do not rely on fax numbers listed in directories, phone books, websites, etc.. or provided by persons other than the recipient.

Faxes and Copiers

- Program frequently used fax numbers into the machine's memory, use the speed dial numbers, and institute a set procedure for testing programmed numbers at regular intervals (e.g. weekly or monthly). IT can assist with the programming of the numbers
- In the event of a misdirected fax, contact the recipient to confirm improperly faxed documents are immediately returned or destroyed
- Document that the faxed was misrouted in a HIPAA Incident Report form and attach documentation that the information was returned or destroyed
- Send report immediately to the HIPAA Privacy Officer
- Take steps to mitigate any future errors

Mobile Device Security

- Computers, cell phones, and other mobile devices should not be left unattended in public areas
- Log off computers or lock monitors when leaving your desk
- Devices must be password protected with a screen lock
- Loss or theft of your devices that contain PHI or any work information (including e-mail) must be reported immediately to the Service Desk and to the HIPAA Privacy Officer
- If you use your personal cell phone for work, do not share that phone with other family members
- Texting of PHI is never permissible; the connection is not secure.

Social Media

- **Do not** share any PHI acquired through your work at Immanuel, even if the information is public
- **Do not** take or post pictures of residents/participants
- Posting PHI without authorization is a violation of the resident/participant's rights and confidentiality
- Report any social media posts that you feel may be inappropriate, regardless of who posted it.



Fraud, Waste, and Abuse

Fraud, Waste, and Abuse

- Fraud, Waste, and Abuse training is a legal requirement for all Medicare Part C & Part D plan sponsors
- Immanuel Pathways is considered a Medicare Part C and Part D plan sponsor
- Immanuel Pathways' Medicare Part C and Part D Fraud, Waste, and Abuse training and compliance plan has been incorporated into the overall Immanuel Compliance Program and Policy; so all Immanuel employees, contractors, and vendors must receive FWA training

What are my responsibilities as an employee, temporary worker, or volunteer at Immanuel?

You are a vital part of Immanuel's efforts to prevent, detect, and report Medicare non-compliance as well as possible fraud, waste, and abuse.

- FIRST you are required to comply with all applicable statutory, regulatory, and other Part C & Part D requirements.
- SECOND you have a duty to the Medicare Program to report any violations of laws that you may be aware of or suspect
- THIRD you have a duty to follow Immanuel's Code of Conduct that articulates your commitment to the CHRIST Promises and ethical rules of behavior

What is Fraud?

- Fraud is intentionally submitting false information to the government or a government contractor in order to get money or a benefit
- For example:
 - Knowingly billing for services that were not given

Legal Definition of Fraud - Knowingly and willingly executing or attempting to execute, a scheme to defraud any health care benefit program or obtain by means of false pretenses, representations, or promises, any of the money or property owned by, or under the custody or control of, any health care benefit program.

What is Waste?

- Waste is using, spending, or consuming services in a thoughtless or careless way.
- For example:
 - Providing services that are not medically necessary
 - Prescribing expensive medications, when a less expensive medication is available

Legal Definition of Waste: The overutilization of services or other practices that, directly or indirectly, result in unnecessary costs to the Medicare Program. Waste is generally not considered to be caused by criminally negligent actions, but rather a misuse of resources.

What is Abuse?

- Abuse includes any actions that may, directly or indirectly, result in unnecessary costs to the Medicare Program
- For example:
 - Billing for unnecessary medical services
 - Billing for brand name drugs when generic drugs are dispensed
 - Charging excessively for services or supplies

Legal Definition of Abuse: Abuse involves payment for items or services when there is no legal right to that payment and the provider has not knowingly and/or intentionally misrepresented facts to obtain payment.

Difference Between Fraud, Waste, and Abuse

There are differences between fraud, waste, and abuse. One of the primary differences is in intent and knowledge

- Fraud requires that person to have an ***intent*** to obtain payment and the ***knowledge*** that their actions are wrong
- Waste and Abuse may involve obtaining an improper payment, but does not require the same intent and knowledge

Who can be involved in FWA?

- Participants
- Employees (includes temporary employees & volunteers)
- Pathways (health plan)
- Providers/Prescribers
- Manufacturers
- Pharmacies
- Pharmacy Benefit Managers (PBMs)
- Skilled Nursing Facilities
- Assisted Living providers who accept Medicaid waivers

Understanding FWA

- To detect FWA, you need to know the law
- The following slides will provide information about the following laws:
 - False Claims Act
 - Anti-Kickback Statute
 - Stark Statute (Physician Self-Referral Law)
 - Exclusion List
 - HIPAA
 - Whistleblower Protection Act

False Claims Act (FCA)

- The False Claims Act (FCA) makes a person liable to pay damages to the government if he or she knowingly:
 - Conspires to violate the FCA
 - Carries out acts to obtain property from the government by misrepresentation
 - Conceals or avoids an obligation to pay the government
 - Makes or uses a false record or statement supporting a false claim
 - Presents a false claim for payment or approval
- Damages and Penalties
 - Any person who knowingly submits false claims to the government is liable for three times the government's damages caused by the violator plus a penalty
 - The Monetary Penalty may range from \$10,781 to \$21,563 for each false claim

False Claims Act: Examples

- Examples:
 - A provider who submits a bill to Medicare or Medicaid for services that were not rendered
 - Submission of false information about services performed or charges for services performed
 - Inserting a diagnosis code not obtained from a physician or other authorized individual
 - Submission of claims for services ordered by a provider who has been excluded from participating in Medicare, Medicaid and other federally funded health care programs

Anti-Kickback Statute

- The Anti-Kickback Statute prohibits knowingly and willfully soliciting, receiving, offering or paying remuneration (including any kickback, bribe, or rebate) for referrals for services that are paid in whole or in part under a federal health care program (which includes the Medicare program)
- Damages and Penalties:
 - Fines of up to \$25,000, imprisonment up to five (5) years, or both fine and imprisonment
 - The individual or Immanuel also may be excluded from participation in Medicare or other federal health care programs for violating the Anti-Kickback Statute

Stark Statute

(Physician Self-Referral Law)

- The Stark Statute prohibits a physician from making referrals for certain designated health services to an entity in which the physician (or a member of his or her family) has:
 - An ownership/investment interest or
 - A compensation arrangement (exceptions apply)
- Medicare claims tainted by an arrangement that does not comply with Stark are not payable
- Penalties:
 - Up to a \$15,000 fine for each service provided
 - Up to a \$100,000 fine for entering into an arrangement or scheme

Exclusion List Screening

- No federal health care program payment may be made for any item or service furnished, ordered, or prescribed by an individual or entity excluded by the Office of the Inspector General (OIG)
 - The OIG has authority to exclude individuals and entities from federally funded healthcare programs and maintains the List of Excluded Individuals and Entities (LEIE)
- Immanuel maintains an effective policy that addresses screening individuals and entities. It can be located in Policy Tech: Background Checking-OIG Exclusions

Health Insurance Portability and Accountability Act (HIPAA)

- HIPAA created greater access to health care insurance, protection of privacy of health care data, and promoted standardization and efficiency in health care industry
- HIPAA safeguards help prevent unauthorized access to protected health care information. As an individual with access to protected health information, you must comply with HIPAA



Reporting & Non-Retaliation

Reporting & Non-Retaliation Policy

- Immanuel has developed several independent ways to raise questions and report suspected violations or misconduct
- It is everyone's affirmative duty to report any suspected or actual violations of the law or of Immanuel's Code of Conduct
- Immanuel is committed to protecting employees and others who report concerns and violations in good faith from retaliation
 - No disciplinary action or retaliation will be taken against you when you report a perceived issue, problem, concern, or violation in good faith
 - "In good faith" means the reporter actually believes the information reported is true

Whistleblower Protection Act

- The False Claims Act includes a whistleblower provision. A whistleblower is any person with actual knowledge of false claims activity who files a lawsuit on behalf of the U.S. Government
- Whistleblowers are protected from retaliation
- Under federal law, the whistleblower may be awarded a portion of the funds recovered by the government, typically between 15 and 30 percent. The whistleblower also may be entitled to reasonable expenses, including attorney's fees and costs for bringing the lawsuit
- A person who brings a whistleblower action that a court later finds was frivolous may be liable for fines, attorney fees and other expenses

Reporting Suspected Non-Compliance

- Everyone is required to report: 1) suspected instances of fraud, waste, and abuse; 2) violations of Immanuel's Code of Conduct; and 3) HIPAA violations
- Immanuel's Code of Conduct clearly states this obligation
- Do not be concerned if you are not completely sure if the situation constitutes an actual violation. Just report any concerns to the Compliance Hotline or Website, or to any of the individuals listed on the next two (2) slides. Immanuel's compliance department will investigate and make the proper determination
- **Immanuel will not retaliate against you for making a report in good faith**

Reporting Suspected Non-Compliance

Compliance Hotline

■ Compliance Reporting Lines

— Website:

- www.Immanuel.ethicspoint.com
- When in Citrix, look for this icon on your desktop (it will directly link you to the website)



— Hotline:

- (855) 857-6164
- Live Operator (independent company)
- 24 hours a day/seven (7) days a week



Compliance Hotline and Website



NAVEX GLOBAL™
The Ethics and Compliance Experts



Immanuel

[Make a Report](#)

[Follow-up on a Report](#)

[Code of Conduct](#)

[False Claims](#)

[FAQs](#)

To Make a Report

You may use either of the following two methods to submit a report:

- Select the **"Make a Report"** link at the top of this web page.

OR

- Dial toll-free, within the United States, Guam, Puerto Rico and Canada:
855-857-6164

After you complete your report you will be assigned a unique code called a "report key." Write down your report key and password and keep them in a safe place. After **5-6** business days, use your report key and password to check your report for feedback or questions.

ATTENTION! This webpage is hosted on EthicsPoint's secure servers and is not part of the Immanuel website or intranet.

Our Commitment

Immanuel is an organization with strong values of responsibility and integrity. Our **Code of Conduct** contains general guidelines for conducting business with the highest standards of ethics.

Immanuel is committed to an environment where open, honest communications are the expectation, not the exception. We want you to feel comfortable in approaching your supervisor or management in instances where you believe violations of policies or standards have occurred.

In situations where you prefer to place an anonymous report in confidence, you are encouraged to call the hotline or go online. Both methods are hosted by a third party hotline provider, EthicsPoint. You are encouraged to submit reports relating to violations stated in our **Code of Conduct**.

The information you provide will be sent to us by EthicsPoint confidentially and anonymously, if you should choose. You have our guarantee that your comments will be heard.

See the **EthicsPoint FAQs** for more information.

EthicsPoint is NOT a 911 or Emergency Service:
Do not use this site to report events presenting an immediate threat to life or property. Reports submitted through this service may not receive an immediate response. If you require emergency assistance, please contact your local authorities.

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Your Responsibility

Enforcement & Disciplinary Standards

- If Immanuel, or any person or entity affiliated with Immanuel, is found to be in violation of fraud, waste, and/or abuse laws or other healthcare regulations discussed in the Code of Conduct, the penalties can be severe:
 - Disciplinary action up to and including termination
 - Exclusion from participation in Medicare and Medicaid programs
 - Fines
 - Jail sentence for employees, administrators, and physicians



Your Responsibility

- To fulfill your role, you must commit to the following:
 - Complete all required compliance trainings
 - Watch for problem areas (areas of non-compliance) while on the job. If you suspect there is a violation of the Code of Conduct or HIPAA, it is your obligation to report it
 - Agree to read and abide by the Code of Conduct and all policies and procedures as a condition of employment

