

Compliance Training



Introduction

Welcome to Catholic Health's Compliance training course. The laws governing healthcare activities are complex and continually changing.

Catholic Health is committed to fostering a culture of integrity and compliance so all Catholic Health entities operate at only the highest standards of ethical conduct.

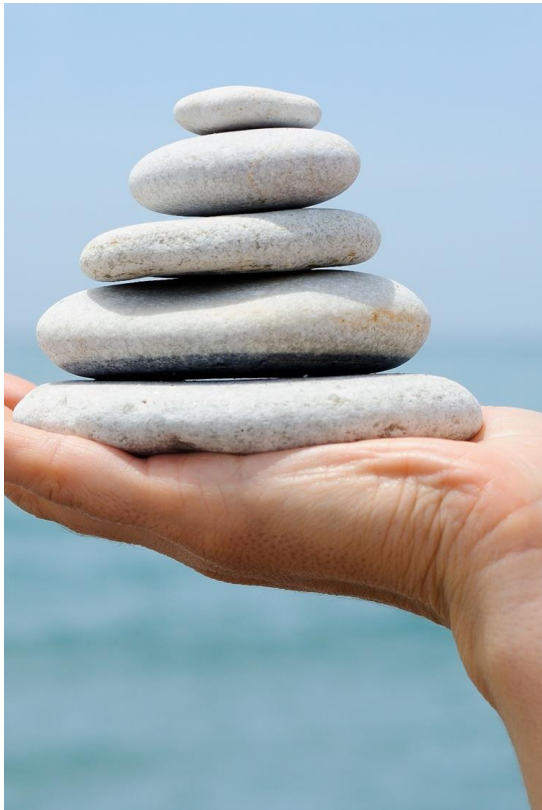
This training will provide you with important information regarding Catholic Health's Compliance Program.

For specific questions about compliance issues, you are encouraged to consult your supervisor or Compliance Officer.



Code of Conduct

Catholic Health's Code of Conduct addresses ethical behavior principles requiring the governing body, employees, medical staff, volunteers and vendors to perform their responsibilities with honesty, integrity and confidentiality.

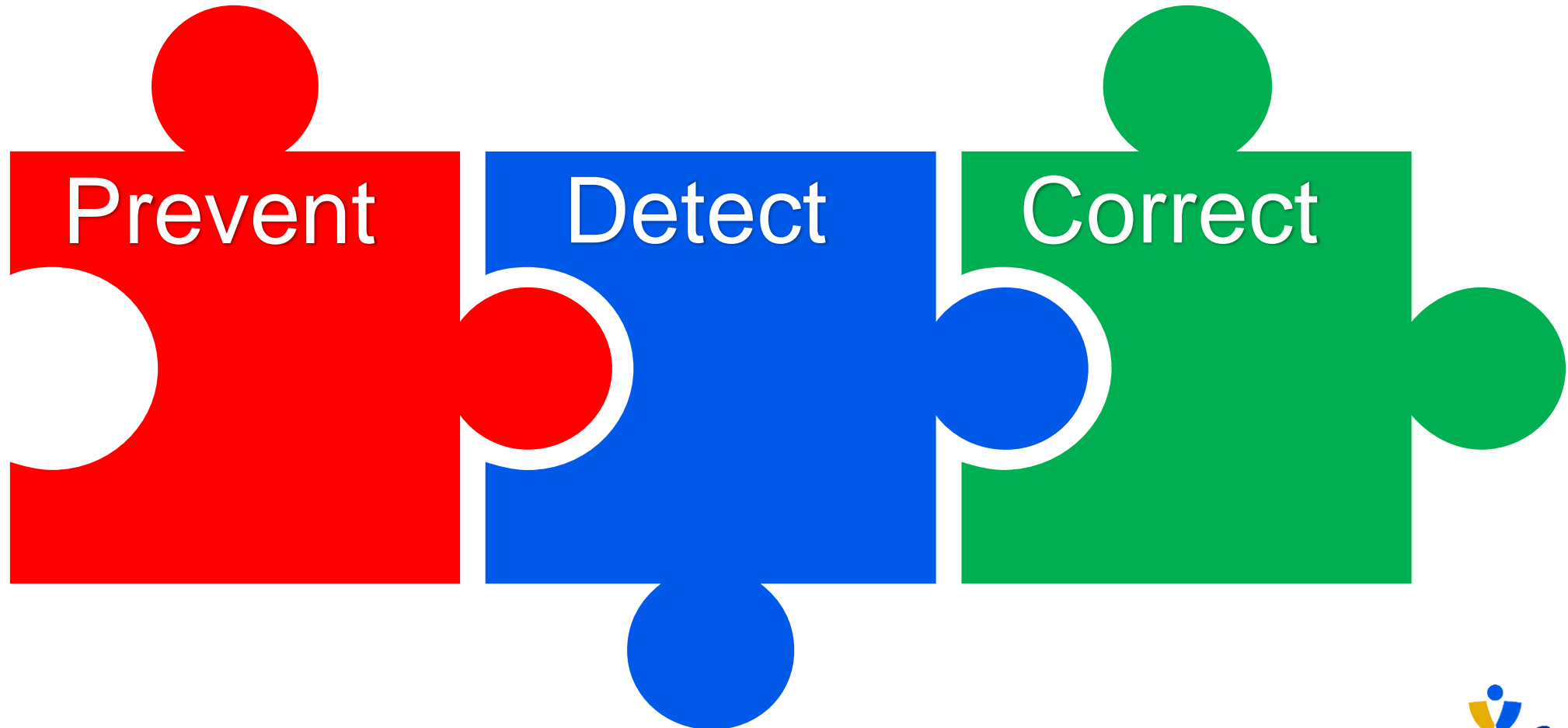


To do the right thing everyone should:

- Comply with all applicable laws, regulations and policies
- Never use your position for personal advantage
- Act fairly and honestly
- Adhere to high ethical standards in all you do
- Ensure protected health information is kept confidential
- Report any known or suspected compliance issue
- Never knowingly make false or misleading statements
- Maintain a healthy and safe work environment

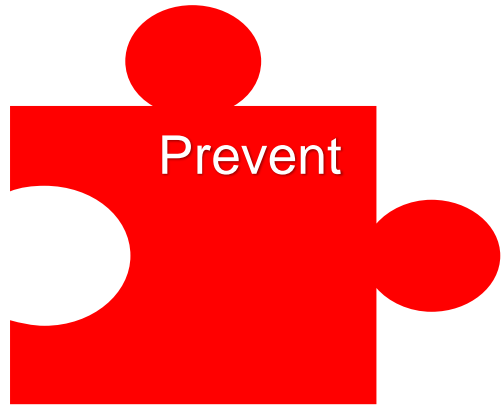
Catholic Health Compliance Program

The goals of an effective compliance program are to:

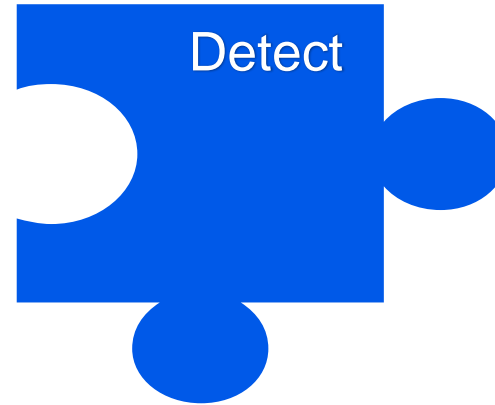


Catholic Health Compliance Program

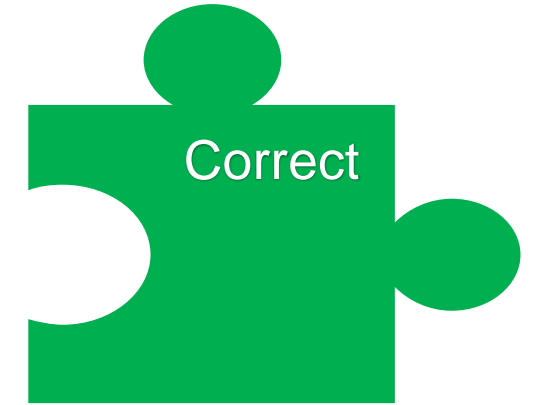
These goals are incorporated into the compliance program through the following elements:



- ✓ Written policies, procedures and standards of conduct
- ✓ Compliance Officer and Compliance Committee
- ✓ Compliance program training and education

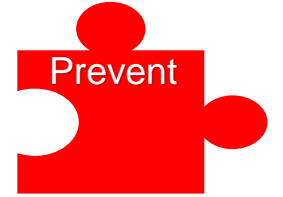


- ✓ Lines of communication
- ✓ Auditing and monitoring



- ✓ Responding to compliance issues
- ✓ Disciplinary standards

Catholic Health Compliance Program



Written Policies and Standards of Conduct

- Catholic Health compliance policies function like internal laws that govern the conduct of the governing body, employees, medical staff, volunteers and vendors.
- These policies provide guidance on:
 - how to deal with potential compliance issues
 - how to communicate potential compliance issues to appropriate personnel
 - how potential compliance issues are investigated and resolved



Catholic Health Compliance Program

Written Policies and Standards of Conduct (continued)

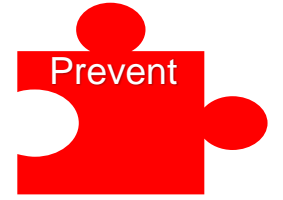


- All Catholic Health compliance policies can be found on the intranet under policies, as well as on the Internal Audit & Compliance Department page
- For Example: ***Catholic Health's Whistleblower Protection, Non-Intimidation and Non-Retaliation Policy***, which prohibits retaliation against an individual or group for reporting a good-faith concern related to a violation or potential violation of any Catholic Health or Entity policy or any applicable law, rule or regulation

Whistleblowers may NOT be discharged, demoted, suspended, threatened, harassed or in any manner discriminated against as a result of reporting a concern in good faith

Catholic Health Compliance Program

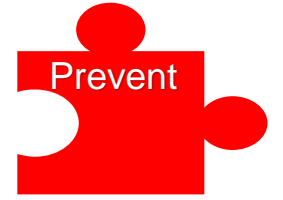
Designated Compliance Officer and Compliance Committee



- Catholic Health has designated an individual, independent of management, to serve as its Chief Compliance Officer (CCO), Pegeen McGowan, Senior Vice President Internal Audit & Compliance
- The CCO reports to the Catholic Health Board through its Compliance & Audit Committee. The CCO also meets routinely with Catholic Health's President and Chief Executive Officer, General Counsel and other Senior Executives
- Each Catholic Health entity has a Compliance Officer who reports directly to the CCO
- Each Catholic Health entity has a Management Compliance Committee that is fully integrated into its operations, meeting quarterly to review and discuss compliance activities
- Catholic Health's Board of Directors and management fully support its Compliance Program

Catholic Health Compliance Program

Compliance Program Training and Education

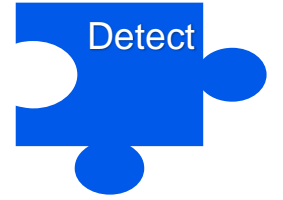


- The governing body, employees, medical staff, volunteers and vendors receive training and education on compliance expectations and compliance program operations. Training and education occurs initially as a new hire, annually thereafter and periodically when necessary.
- The training you receive for your position within Catholic Health is very important as it guides you to perform your duties in a compliant manner.

Catholic Health Compliance Program

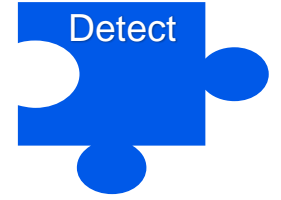
Lines of Communication

- Catholic Health provides ways to comfortably communicate questions and report potential compliance concerns with Compliance.
- You can make a good-faith report, without fear of intimidation or retaliation, by:
 - Contacting your Supervisor/Manager/Director/Vice President
 - Contacting your Entity Compliance Officer
 - Calling the confidential Compliance Helpline at **(866) 272-0004**, available 24/7
 - Utilizing the Compliance Report Form, located on the Internal Audit & Compliance Department's intranet page
- You can remain anonymous or, if you would like a call back, please provide your contact information



Catholic Health Compliance Program

Auditing and Monitoring



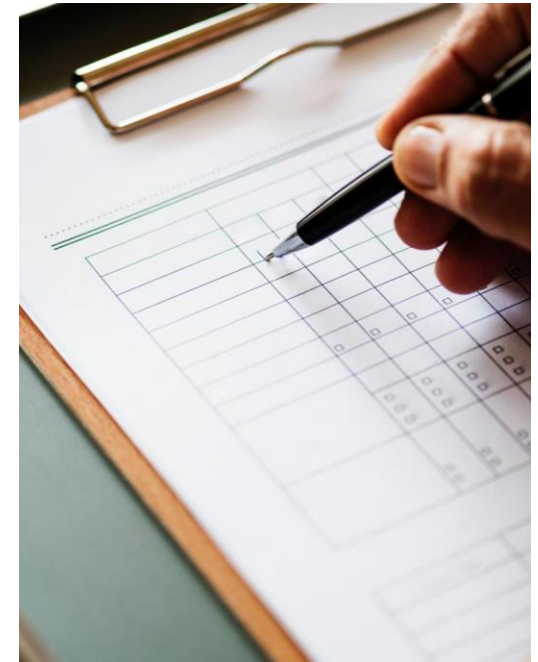
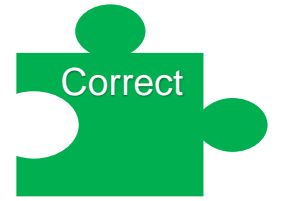
- Compliance develops annual workplans based on a compliance risk assessment which considers:
 - Identified areas of risk within the healthcare industry and specifically for Catholic Health
 - Regulatory activity, such as OIG and OMIG workplans
 - Compliance performs audits to determine appropriate documentation, coding and billing
 - Compliance conducts annual reviews of its compliance program to determine its effectiveness, and whether revisions are required



Catholic Health Compliance Program

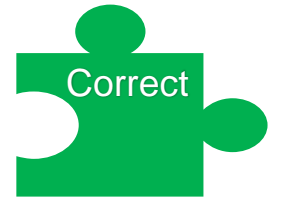
Responding to Compliance Issues

- Compliance has a system to respond to issues as they are raised. All matters reported to Compliance are thoroughly investigated in a confidential and timely manner.
- The Compliance Officer will follow up on all compliance concerns identified through reports, investigations or auditing and monitoring.
- The Compliance Officer, in consultation with applicable stakeholders, will determine whether corrective action, including self-disclosure, is required to address compliance risks and vulnerabilities.
- The Compliance Officer may perform re-audits, recommend new or revised policies or implement new or enhanced monitoring processes, among other things.
- The Compliance Officer may call on you to assist in evaluating the need for or implementing corrective actions, where appropriate



Catholic Health Compliance Program

Disciplinary Standards

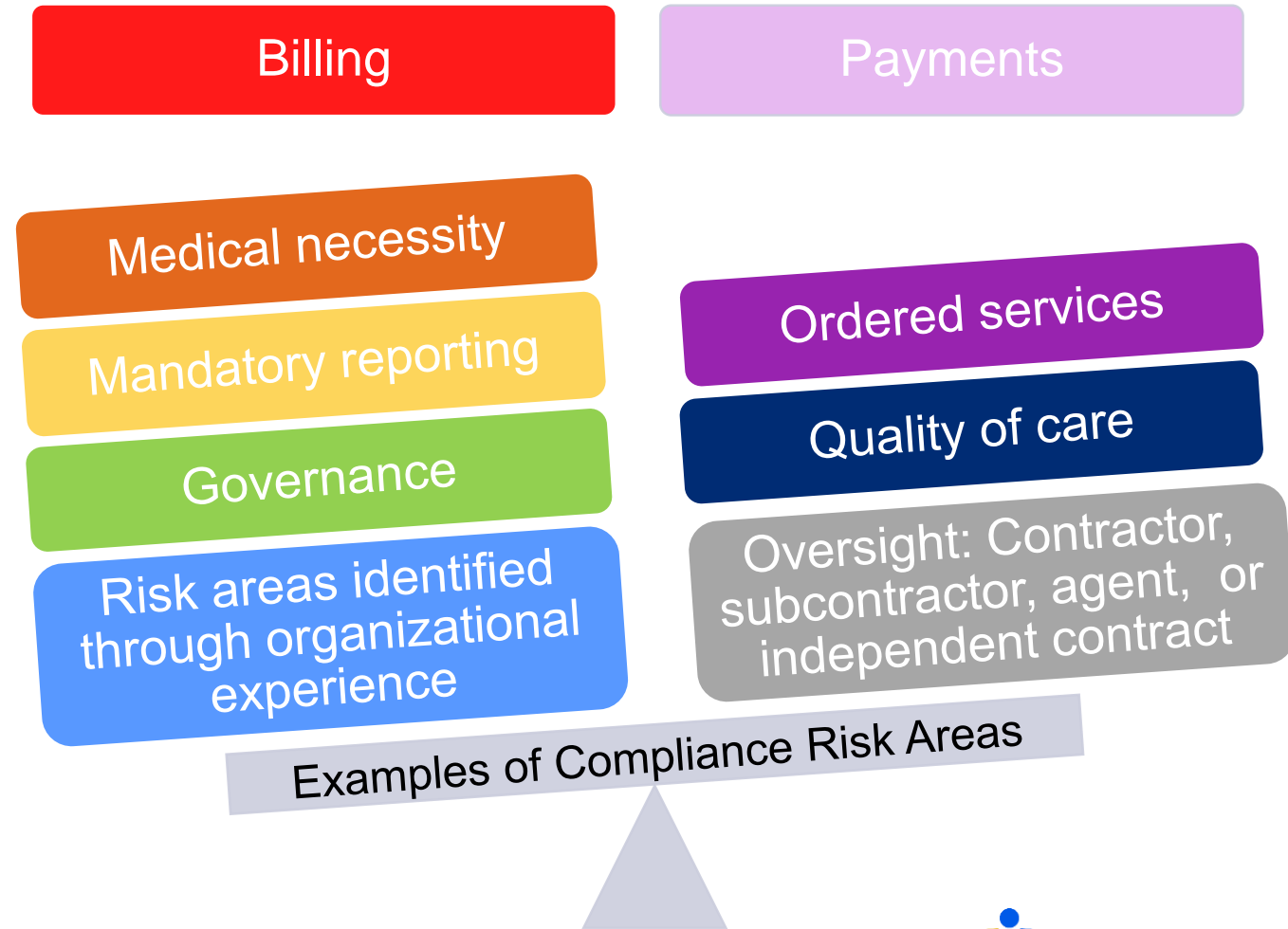


- Catholic Health maintains policies that articulate expectations for the prevention, detection and reporting of fraud, waste and abuse; as well as outlining sanctions for violating Compliance Program standards
- All individuals within Catholic Health, regardless of position, are subject to Catholic Health's disciplinary standards
- Disciplinary standards with respect to vendors may include measures up to and including reassignment of vendor personnel or suspension or termination of the contract

Healthcare Compliance Risk Areas

Healthcare is a complex, high-risk industry that demands compliance with federal and state regulatory requirements as well as organizational policies and practices.

It is important for everyone to be aware of the key healthcare risk areas for fraud, waste and abuse and to maintain a safe, high-quality environment for patients, visitors, vendors and employees.



Compliance Risk Awareness

Documentation, Coding and Billing

- Complete and accurate documentation and coding are critical in providing compliant billing and quality patient care. Therefore, documentation, whether written or electronic, must be:

Legible

Signed

Complete

Accurate

Dated and
Timed

- Errors in documentation may lead to non-compliant coding and billing. Such as:

Incorrect
procedure
codes

Date of
service
errors

Incorrect
patient
name

- Most coding errors are a result of documentation that is:

Incomplete

Inaccurate

Illegible

Compliance Risk Awareness

Emergency Medical Treatment and Labor Act (EMTALA)

- EMTALA is also known as the anti-dumping statute. It was enacted to require access to emergency services to any person who presents to Medicare participating emergency department (ED) seeking treatment for a real or perceived emergency medical condition or to a woman in labor regardless of an individual's citizenship, legal status or ability to pay.
- The ED must conduct an appropriate medical screening exam to determine if the individual has an emergency medical condition (EMC). If there is no EMC the hospital's EMTALA obligations end. If there is an EMC, the hospital must:
 - Treat and stabilize the individual
 - Transfer the individual only when
 - the hospital does not have the necessary resources (capability)
 - the hospital does not have any beds available (capacity),
 - the patient's request or other reasons that are in the best interest of the patient



Compliance Risk Awareness

Fraud, Waste and Abuse (FWA)

- **FRAUD** means an intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to themselves or some other person
- Some examples of the most common types of provider healthcare fraud include:

Billing for
services not
rendered

Billing for
services not
medically
necessary

Misrepresenting
procedures
performed to
obtain payment
for non-covered
services (e.g.,
cosmetic
surgery)

Upcoding –
billing for a
more costly
service than
what was
actually
performed

Compliance Risk Awareness

Fraud, Waste and Abuse (FWA)

- **WASTE** means the overuse of services and resources (not caused by criminally negligent actions), directly or indirectly, that results in unnecessary costs to the healthcare system, including Medicare and Medicaid programs. Examples of Waste include:
- **ABUSE** means practices that are inconsistent with sound fiscal, business, medical or professional practices, and which result in unnecessary costs to the Medicare or Medicaid programs. Examples of Abuse include:

Ordering
excessive
diagnostic
tests

Prescribing
medications
without
validating if the
patient still
needs them

Misusing
codes on a
claim

Billing for
brand name
drugs when
generics are
dispensed

Compliance Risk Awareness

Conflict of Interest and Gifts

- A conflict of interest may exist when an individual's personal activities or interests influence, or appears to influence, judgment, decision making or job performance.
- Conflicts may include, but are not limited to, relationships, associations or business dealings with contractors, vendors, other healthcare providers or individuals.
- Catholic Health's Gift Policy: Acceptance of gifts from vendors, patients and families must comply with applicable laws and ethical standards. Gifts that influence or appear to influence an individual in the conduct of his/her responsibilities shall never be accepted.



- Cash and cash equivalents, including gift cards, are never acceptable
- Never solicit gifts from vendors, patients and families
- Gift of nominal value (\$50 or less) on an occasional basis may be permissible but there are guidelines

Compliance Risk Awareness

Federal Anti-Kickback Statute (AKS)

- AKS is a criminal law that prohibits the knowing and willful offer or payment of remuneration to induce or reward patient referrals or the generation of business involving any item or service payable by the Federal healthcare programs (e.g., drugs, supplies or healthcare services)
- Remuneration can take many forms. Examples of remuneration include:

Cash or cash equivalents	Free rent for office space or rent below fair market value	Expensive hotel stays or expensive meals	Excessive compensation for medical directorships
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- Violations of the AKS may result in significant civil and criminal penalties, jail terms and exclusion from participation in the federal and state healthcare programs

Compliance Risk Awareness

Physician Self-Referral Law (Stark Law)

- The Stark Law prohibits a physician from referring Medicare and Medicaid patients for certain designated health services to a facility with which the physician group, physician (or an immediate family member) has a financial relationship unless a specific exception applies. This is strict liability statute, therefore no intent is required for a violation to occur.
- The Stark Law focuses on physician self-referrals and is intended to prevent healthcare providers from inappropriately profiting from referrals

Examples of
Stark violations:

Leasing space to a
physician below
fair market value

Contracting with a
physician for a sham
directorship position

- Consequences of violations may result in a denial for payment for the prohibited transaction, require the refund of payments received, civil penalties and exclusion from federal and state healthcare programs

Compliance Risk Awareness

The False Claims Act (FCA)

- The FCA is a federal statute that covers fraud involving any government funded contract or program. It imposes liability on any person who submits a claim to the government that knows (or should know) is false
- The FCA broadly defines the term knowingly as a person who:

Has actual knowledge
of the information

Acts in deliberate
ignorance of the truth or
falsity of the information

Acts in reckless disregard
of the truth or falsity of the
information

- Example of a False Claim includes:

A physician submits claims
for services they know was
never provided

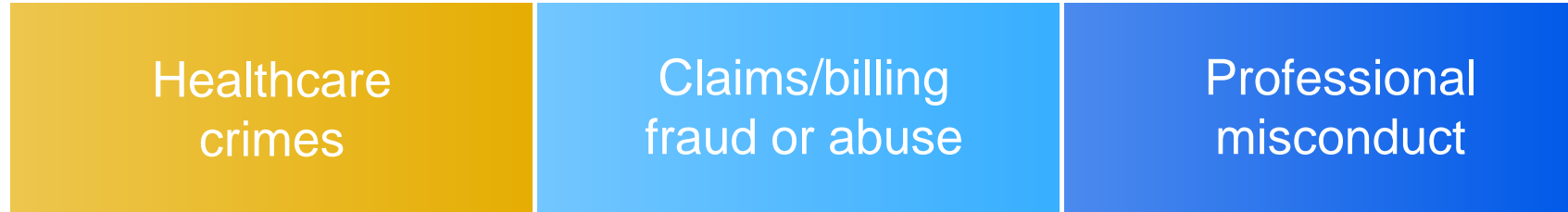
Improperly admitting patients to the
hospital for services that should have
been provided in an outpatient setting

- Violations of the FCA may result in significant civil and criminal penalties, jail terms and exclusion from participation in the federal and state healthcare programs

Compliance Risk Awareness

Exclusion Screening

- The Office of Inspector General (OIG) and the Office of Medicaid Inspector General (OMIG) can exclude certain providers from participating in relevant government funded programs such as Medicaid and Medicare.
- There are various reasons for which exclusions can occur, most of which can be grouped into roughly three categories:



- Catholic Health conducts appropriate screening of all employees, medical staff, referring practitioners, vendors and board members to determine if they are excluded from participation in a federal or state healthcare program. These screenings are performed pre-hire/credential and monthly thereafter. Exclusions are dealt with through termination.

Compliance is Everyone's Responsibility

If You See Something, Say Something

- Does something not feel right, or do you have an issue you want to discuss? Your Compliance Officer can help
- No matter what your function, you are a critical part of the success Catholic Health's Compliance Program
- You have the responsibility to report suspected noncompliant or illegal activities to your supervisor and/or Compliance
- When in doubt, ask yourself:

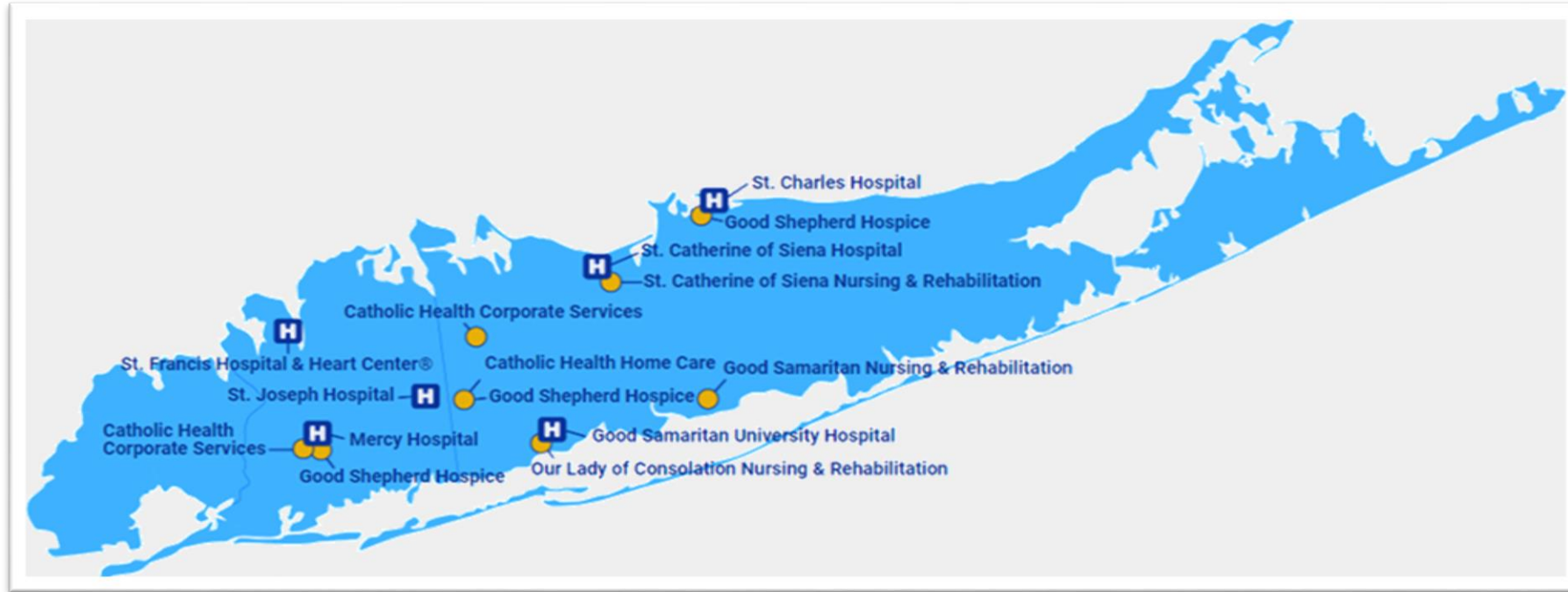
Is it a fair and honest thing to do?

Is it in the best interest of Catholic Health and its patients?

Would it be good to see the action or behavior described in the newspaper?

- If the answer to any of these questions is **"NO,"** the action should be reconsidered

Catholic Health Compliance Officers



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Thank you