General Compliance Training.

2017 Version
Training Objectives

At the conclusion of training you should be able to:

• Understand NMH's Code of Conduct
• Understand NMH's compliance program
• Know your compliance resources
• Identify examples of potential fraud, waste & abuse
• Describe your role in the compliance program
Benefits of a Compliance Program

• Demonstrates commitment to honesty and ethical business practices
• Improves the quality, efficiency and consistency of customer care
• Encourages team members to do the right thing and report concerns
• Facilitates timely response to concerns and thorough follow up
• Promotes taking corrective action to problem areas
• Reduces the risk of penalties and criminal sanctions
NMH Compliance Program

Consists of:

• Codes of Conduct and written policies and procedures
• Designation of a Chief Compliance Officer
• Open Lines of Communication
• Compliance Committees
• Training and Education
• Auditing and Monitoring
• Response to Detected Problems and Corrective Actions
• Enforcement of Disciplinary Standards
Codes of Conduct, Policies and Procedures

- Codes of Conduct explains NMH's expectations of team members related to ethical behaviors and complying with federal and state laws.
  - Located on the intranet under Team Member Resources and on the Compliance webpage
- All team members have access to general compliance, privacy and data security policies and procedures through PolicyTech.
Compliance Team

• Chief Compliance Officer: Kelsey Brodsho
  – Kelsey.Brodsho@northmemorial.com
  – compliance@northmemorial.com
  – 763.581.0976

• Privacy Officer: Deb Contreras
  – Deb.contreras@northmemorial.com
  – privacy@northmemorial.com
  – 763.581.4437

• Data Security Officer: Mike Sweet
  – Mike.sweet@northmemorial.com
  – datasecurity@northmemorial.com
  – 763.581.2503
Reporting Compliance Concerns

• NMH prohibits any form of retaliation against a person reporting a concern in good faith

• There are many ways to report concerns. For example:
  – Speak to your immediate supervisor
  – Contact the Chief Compliance Officer at 763.581.0976
  – Email the Chief Compliance Officer at compliance@northmemorial.com
  – Email the Privacy Officer at privacy@northmemorial.com
  – Email the Data Security Officer at datasecurity@northmemorial.com
  – Call the Compliance Hotline at 763.581.4670
Compliance Committees

• There are a number of compliance committees given our diverse services. For example:
  – Medical Transportation Services
  – Pharmacy Operations
  – Laboratory Services
  – Hospice Services
  – Hospital Services
  – Ambulatory Services

• Committees meet at least quarterly

• Committees include representatives from operations and other support departments such as: Revenue Cycle, Finance, Information Technology, Quality, etc.
Training and Education

• Compliance training and education is provided in a number of ways.
  – New team member orientation (mandatory requirement)
  – Annual compliance training (mandatory requirement)
  – Department specific training by supervisors, managers, leaders or the Compliance Department
  – Ad hoc online courses
  – Ad hoc mandatory training
Auditing and Monitoring

• NMH has a robust monitoring and auditing program as a component of the Quality Program.
• Monitoring and auditing are also performed within the Compliance Program.
• Monitoring is performed by department management and involves checking on processes to validate that activities are performed as intended.
• Auditing is performed by an independent and objective independent auditor or consultant that has no operational accountability for the area being audited.
Response to Detected Problems and Corrective Actions

• All reported concerns are full investigated by the Compliance Department
• Investigations are handled confidentially
• The goal is to identify the “root cause” of the problem and implement appropriate process changes to prevent the problem from happening again
Enforcement of Disciplinary Standards

• Compliance with the Code of Conduct, following policies and procedures, and complying with laws is an expectation of employment.

• Violations of these expectations are subject to disciplinary action up to and including termination.

• Supervisors, managers and leaders who fail to oversee compliance in their area of responsibility are also subject to disciplinary action.
False Claims Act

- Law was passed in 1863 and referred to as the Lincoln Law (passed while Abraham Lincoln was president).
- Any person who knowingly presents a false or fraudulent claim to the government for payment will be fined at a minimum.
- Fraud investigations are initiated by the government or a private citizen.
- The private citizen is referred to as a “whistle-blower” and protected under the law from retaliation by their employer if the investigation involves their employer.
Fraud, Waste & Abuse

- **Fraud** is an intentional deception or misrepresentation that benefits a person or organization.

- **Waste** (inefficiencies) is the thoughtless or careless expenditure, consumption, mismanagement, use, or squandering of resources, whether intentional or unintentional, to the detriment or potential detriment of North Memorial Health Care or a government program.

- **Abuse** (bending the rules) is improper behavior or billing practices.
Fraud, Waste & Abuse

Examples of Fraud, Waste & Abuse:

• Billing for services at a higher level than what was performed. This results in receiving a higher payment.
• Billing for services that were never provided to a customer.
• Providing services to a customer that were not necessary to treat their illness. Also referred to as not medically necessary.
• A doctors prescription pad or DEA (Drug Enforcement Agency) Number is stolen and used to write prescription for controlled substances.
• Identity theft to receive health care or prescriptions.
Fraud, Waste & Abuse

Settlements related to Fraud, Waste & Abuse:

• A nurse paid a fine and lost her license for submitting claims for care provided to nursing home customers the nurse never saw.

• A hospital paid a fine of $1.16 million for changing pneumonia diagnosis codes to other codes that would result in higher payments to the hospital.

• Emergency room doctors paid a fine of $1.6 million for false claims that were submitted by their billing company.
Conflict of Interest

Settlements related to Fraud, Waste & Abuse:

• A conflict of interest could exist when a personal interest influences or appears to influence a person’s objectivity while performing their NMH duties.

• There are two general conflicts of interest NMH is most concerned with:
  – Customer Relationships
  – Financial and Business Relationships
Customer Relationships

• Team members are prohibited from accepting cash, gift cards or other gifts from customers. Gifts that cannot be returned are to be sent to the North Foundation.

• A practitioner cannot serve as an executor, power of attorney, guardian, private case manager, conservator or trustee of assets for any customer in their care.

• Practitioners are also prohibited from being named as a beneficiary in a customer’s will.

• A practitioner cannot treat a member or members of his/her immediate family.
Financial and Business Relationships

• There are many different examples of financial and/or business relationships that raise a conflict of interest concern. A few examples include:
  – Receiving promotional items, gifts or reimbursement from a vendor
  – Using NMH time, personnel, equipment or personal property other than for conducting NMH business
• If there is any question or doubt about a conflict of interest, discuss with your immediate supervisor.
Anti-Kickback Law

• Anti-Kickback Law prohibits NMH representatives from knowingly and willfully offering, paying, asking for or receiving any money or other benefit in connection with items or services billed to federal health care programs.

• No NMH representative may offer gifts, loans, rebates, services or payment of any kind to a physician who refers customers to NMH.

• Agreements with physicians are required to follow a strict set of guidelines.
Stark Law – Self Referrals

- Stark Law prohibits physicians from referring Medicare customers for certain designated health services ("DHS") to an entity with which the physician or a member of the physician’s immediate family has a financial relationship.
- An immediate family member includes any person who has a legal, blood, or any other relationship.
- Examples of relatives include, but are not limited to: current spouse, domestic partner, parent, child, grandchild, sibling, aunt, uncle, in-laws, the spouse’s immediate family members, and any person living in the household of the physician.
• **Designated Health Services** include any of the following services:
  – clinical laboratory services;
  – physical therapy, occupational therapy, and outpatient speech language pathology services;
  – radiology and certain other imaging services;
  – radiation therapy services and supplies;
  – durable medical equipment and supplies;
  – parenteral and enteral nutrients, equipment, and supplies;
  – prosthetics, orthotics, and prosthetic devices and supplies;
  – home health services;
  – outpatient prescription drugs; and
  – inpatient and outpatient hospital services.
How You Can Help the Compliance Program

• You play an important role in the success of NMH's compliance program.

• You should:
  – Attend all training and education sessions
  – Ask questions about areas you don’t understand
  – Actively seek out concerns and notify your immediate supervisor
  – Play an active role in problem solving
  – Support the compliance program