

**POLICY TITLE: FEDERAL PROGRAM EXCLUSION SCREENING**

**APPROVED BY: COMPLIANCE COMMITTEE**

**ORIGINATED BY: COMPLIANCE OFFICER**

**REVIEWED/REVISED: 1/2011; 10/02/2012; 10/01/2013; 10/01/2014; 10/08/2015**

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**Key Points**

- This Policy applies to The Christ Hospital and all of its wholly-owned subsidiaries (collectively, “TCH”).
- This Policy provides guidelines for the screening of Covered Persons to determine if they are subject to exclusion by the Federal government from participating in Federal health care programs, Federal procurement or non-procurement programs or convicted of a criminal offense that falls within the scope of 42 U.S.C. § 1320a-7(a), but not yet excluded, debarred, suspended, or otherwise declared ineligible.
- This Policy sets forth the requirement that Covered Persons immediately disclose to TCH if they are subject to debarment, exclusion, suspension, or any other event that makes that Covered Person an Ineligible Person, as defined below.

**Definitions**

**Covered Persons** includes:

1. Owners, officers, directors, and employees;
2. Contractors, subcontractors, agents, and other persons who provide patient care items or services or who perform billing or coding functions on behalf of TCH excluding vendors whose sole connection with TCH is selling or otherwise providing medical supplies or equipment to TCH and who do not bill the Federal health care programs for such medical supplies or equipment; and
3. Physicians and other non-physician practitioners who are members of TCH’s active medical staff.

Notwithstanding the above, the term Covered Persons does not include part time or per diem employees, contractors, subcontractors, agents, and other persons who are not reasonably expected to work more than 160 hours per year, except that any such individuals shall become Covered Persons at the point when they work more than 160 hours during the calendar year.

**Ineligible Person** shall include an individual or entity who:

1. Is currently excluded, debarred, suspended, or otherwise ineligible to participate in the Federal health care programs or in Federal procurement or non-procurement programs; or
2. Has been convicted of a criminal offense that falls within the scope of 42 U.S.C. § 1320a-7(a), but has not yet been excluded, debarred, suspended, or otherwise declared ineligible.

**GSA List** means the General Services Administration (“GSA”) System for Award Management. The GSA List is available on the internet in a searchable format at <http://www.sam.gov>.

**HHS/OIG List** means the HHS/OIG List of Excluded Individuals/Entities. The HHS/OIG List is available on the internet in a searchable format at <http://exclusions.oig.hhs.gov/>.

**The Lists** means the GSA List and the HHS/OIG List, collectively.

**Overpayment** means the amount of money TCH has received in excess of the amount due and payable under any Federal health care program requirements.

**Reportable Event** means any isolated event or a series of occurrences that involves:

1. A substantial Overpayment (as defined by all applicable TCH Patient Financial Services Department policies);
2. A matter that a reasonable person would consider a probable violation of criminal, civil, or administrative laws applicable to any Federal health care program for which penalties or exclusion may be authorized;
3. The employment of or contracting with a Covered Person who is an Ineligible Person; or
4. The filing of a bankruptcy petition by TCH.

### **Policy**

1. TCH shall not knowingly employ, contract with, engage the services of, or grant medical staff privileges to any Ineligible Person.
2. TCH shall not knowingly bill any Federal health care program for items or services that are administered, furnished, ordered, or prescribed by any Ineligible Person.
3. TCH shall screen all prospective Covered Persons against the Lists at initial hire, appointment, engagement, or credentialing and annually thereafter.
4. Initial screenings shall be conducted as follows:

- a. **Board Members.** Administration shall screen all prospective Board of Directors (“Board”) members against the Lists prior to appointment to the Board and shall retain documentation that such screening was performed.
  - b. **Employees.** The Human Resources Department shall screen all prospective employees against the Lists prior to making an offer of employment and shall retain documentation that such screening was performed in the employee’s personnel file.
  - c. **Medical Staff Members.** The Medical Staff/Credentialing Office shall screen all prospective medical staff members against the Lists prior to initial credentialing and shall retain documentation that such screening was performed in the medical staff member’s credentialing file.
  - d. **Vendors, Contractors, and Suppliers.** The Purchasing Department shall screen all prospective vendors, contractors, and suppliers against the Lists prior to entering into any contractual or non-contractual transactions and shall retain documentation that such screening was performed in the Purchasing Department’s files.
  - e. **Students.** The hosting TCH department shall screen all prospective students against the Lists prior to allowing a student rotation or internship in the TCH department. In the event the student’s school or educational program has already screened the individual, the department may simply request a copy of the documentation. Note: This provision does not apply to medical residents.
5. The Compliance Officer, or the Compliance Officer’s designee, shall screen all Covered Persons annually. Documentation of screening shall be kept on file with the Compliance Officer.
- a. The Compliance Officer shall review the results of the annual screenings and communicate them to the Compliance Committee.
  - b. Documentation of confirmed exclusions shall be provided to the appropriate departments and kept on file by those departments as follows:
    - i. Board Members – Administration
    - ii. Employees – Human Resources
    - iii. Medical Staff Members – Medical Staff/Credentialing Office
    - iv. Vendors, Contractors, and Suppliers – Purchasing Department

- v. Students – The pertinent department
  - vi. Clinical Investigators – IRB
6. All Covered Persons shall disclose to TCH immediately any debarment, exclusion, suspension, or other event that makes that Covered Person an Ineligible Person.
  7. If TCH has actual notice that a Covered Person has become an Ineligible Person, TCH shall remove such Covered Person from responsibility for, or involvement with, TCH's business operations related to the Federal health care programs and shall remove such Covered Person from any position for which the Covered Person's compensation or the items or services furnished, ordered, or prescribed by the Covered Person are paid in whole or part, directly or indirectly, by Federal health care programs or otherwise with Federal funds until such time as the Covered Person is reinstated into participation in the Federal health care programs.
  8. If TCH has actual notice that a Covered Person is charged with a criminal offense that falls within the scope of 42 U.S.C. §§ 1320a-7(a), 1320a-7(b)(1)-(3), or is proposed for exclusion during the Covered Person's employment or contract term or during the term of the physician's or other practitioner's medical staff privilege, TCH shall take all appropriate actions to ensure that the responsibilities of that Covered Person have not and shall not adversely affect the quality of care rendered to any beneficiary or patient, or the accuracy of any claims submitted to any Federal health care program.
  9. If at any time, TCH identifies an Overpayment, TCH shall repay the Overpayment to the appropriate payor (e.g., Medicare fiscal intermediary or carrier) within thirty days after identification of the Overpayment and take remedial steps within sixty days after identification (or such additional time as may be agreed to by the payor) to correct the problem, including preventing the underlying problem and the Overpayment from recurring. If not yet quantified, within thirty days after identification, TCH shall notify the payor of its efforts to quantify the Overpayment amount along with a schedule of when such work is expected to be completed. Notification and repayment to the payor shall be done in accordance with the payor's policies. Notwithstanding the foregoing, notification and repayment of any Overpayment amount that routinely is reconciled or adjusted pursuant to policies and procedures established by the payor should be handled in accordance with such policies and procedures.
  10. If after a reasonable opportunity to conduct an appropriate review or investigation regarding the employment of or contracting with a Covered Person who is an Ineligible Person TCH determines that there is a Reportable Event, the Compliance Officer shall be responsible for notifying the OIG of the Reportable Event, in writing, within thirty days after making the determination that the Reportable Event exists.

**References**

42 U.S.C. § 1320a-7(a); 42 C.F.R. § 1003.102

21 U.S.C. § 335 (a), (b)

Exec. Order No. 13224; 31 C.F.R. § 594; 31 C.F.R. § 595