# DePaul Corporate Compliance
# Exclusion and Sanction Screening Policy

## Purpose:

DePaul (sometimes referred to as "Organization" or "the Organization") is committed to maintaining high quality care and service as well as integrity in its financial and business operations. Therefore, all necessary steps will be taken by DePaul to ensure it does not employ, contract with, or conduct business with an individual or entity excluded from participation in federally funded healthcare programs, such as Medicare and Medicaid.

For purposes of this Policy, a "contractor" is defined as:

- Any independent contractor, contractor, subcontractor, or other person who, on behalf of the Organization, furnishes or otherwise authorizes the furnishing of Medicare, Medicaid, or other federally funded healthcare items or services, or performs billing or coding functions;
- Any independent contractor, contractor, subcontractor, or other person who provides administrative or consultative services, goods, or services that are significant and material, are related to healthcare provision, and/or are included in or are a necessary component of providing items or services of Medicare, Medicaid, or other federally funded healthcare programs; or
- Any independent contractor, subcontractor, or other person who is involved in the monitoring of healthcare provided by the Organization.

## Policy:

1. It is the policy of DePaul not to employ, contract with, or conduct business with an individual or entity excluded from participation in federally funded healthcare programs, such as Medicare and Medicaid.

2. It is the policy of DePaul that DePaul employees including the President and senior leadership, interns, and Board members have an affirmative responsibility to notify the Compliance Officer promptly if charged with a criminal offense related to healthcare or proposed or found to be subject to exclusion from federal healthcare programs.

3. It is the policy of DePaul to conduct exclusion (sanction) screening of all current and proposed employees including the President and senior leadership, interns, and Board members.

4. It is the policy of DePaul to verify that contractors, as defined by this Policy, who provide and/or perform services for DePaul have not been the subject of adverse governmental actions and/or excluded from the federal healthcare programs.

5. It is the policy of DePaul to verify that any physician or other healthcare practitioner ordering, authorizing, or prescribing goods or services under a federally funded healthcare program, such as Medicare or Medicaid, has not been excluded from participation from federal healthcare programs.

## Regulatory References:

Medicare-Medicaid Anti-Fraud and Abuse Amendments of 1977
Public Law 95-142
18 NYCRR Part 521
Department of Health and Human Services Office of Inspector General: Special Advisory Bulletin on the Effect of Exclusion from Participation in Federal Health Care Programs (5/8/2013)

## Procedures:

I. ***Applicable to Employees, Interns, and Board Members:***

1. DePaul will conduct exclusion checks to verify that all employees including the President and senior leadership, interns, and Board members have not been excluded from federal healthcare programs. An exclusion check is a search of the following sources to determine if the individual's name appears on any of the lists:
    - U. S. Department of Health and Human Services, Office of Inspector General's (OIG) List of Excluded Individuals and Entities (LEIE) available on the website at http://exclusions.oig.hhs.gov
    - The System for Award Management (SAM) available on the SAM website at https://www.sam.gov
    - ***For New York Agencies only:*** NYS Medicaid Fraud Database available on the NYS Office of Medicaid Inspector General (OMIG) website at https://omig.ny.gov/medicaid-fraud/medicaid-exclusions
    - ***For Medicaid Managed Care Organizations (MMCO) only:*** MMCOs will be responsible for utilizing any other list or database that is required within their contract(s).

2. An exclusion check will be performed on all applicants for employment as part of the pre-employment screening process. All names used by the applicant will be obtained and utilized as part of the exclusion screening process. If the exclusion check indicates that any individual has been excluded from federal healthcare programs, the applicant will not be offered employment.

3. An exclusion check will be performed for potential Board members and as part of the screening process. All names used by the potential Board member will be obtained and utilized when conducting the exclusion screening. If the exclusion check indicates that a potential Board member has been excluded from federal healthcare programs, the individual will not be considered for Board affiliation.

4. An exclusion check will be performed on all interns as part of the screening process. All names used by the intern will be obtained and utilized when conducting the exclusion screening. If the exclusion check indicates that the intern has been excluded from federal healthcare programs, the intern will not be offered an internship.

5. The Human Resource Department will maintain an updated list of employees and interns, and will make the list available to the personnel responsible for exclusion screening of such parties.

6. The Compliance Department will maintain an updated list of Board members and be responsible for exclusion screening of all Board members and potential Board members.

7. The Compliance Officer will ensure that exclusion screening is conducted on all employees, interns, and Board members at least every 30 days thereafter. All names used by the parties will be utilized when the exclusion screening is conducted.

8. Any potential matches identified in the ongoing exclusion screening process for employees, interns, and Board members will be reviewed and resolved by the Compliance Officer. The excluded party will be immediately relieved from duty and the Compliance Officer will consult with legal counsel in the event the Organization has been reimbursed for services from the excluded party.

9. The exclusion will be reported as a violation of the Compliance Program and investigated and reported in accordance with the Reporting and Investigation of Compliance Concerns Policy and Procedure.

10. If any employee, intern, or Board member is charged with a criminal offense related to healthcare or is proposed or found to be subject to exclusion from federal healthcare programs, they must be removed from direct responsibility or involvement in any federally funded healthcare program while the matter is pending. If the matter results in conviction or exclusion, DePaul will immediately terminate the relationship with the employee, intern, or Board member.

11. In addition to exclusion screening, the credentials of medical/healthcare and other professionals employed by DePaul will be verified with appropriate licensing and disciplining authorities, including any adverse actions taken against the individuals that might impair their performance of duties on behalf of DePaul. The process is applicable to all employees for which license/certification is required for their duties. The verification will be conducted as part of the hiring process and at least annually thereafter.

II. ***Applicable to Contractors:***

1. DePaul personnel responsible for negotiating or securing contracts shall conduct exclusion checks prior to entering an agreement with a contractor, as defined by this Policy. An exclusion check is a search of the following sources to determine if the individual's or entity's name appears on any of the lists:

- U. S. Department of Health and Human Services, Office of Inspector General's (OIG) List of Excluded Individuals and Entities (LEIE) available on the website at http://exclusions.oig.hhs.gov
- The System for Award Management (SAM) available on the SAM website at https://www.sam.gov
- ***For New York Agencies only:*** NYS Medicaid Fraud Database available on the NYS Office of Medicaid Inspector General (OMIG) website at https://omig.ny.gov/medicaid-fraud/medicaid-exclusions

2. If the exclusion check indicates that a contractor has been excluded from federal healthcare programs, the contract will not be executed until a determination is made by the Compliance Officer as to whether the contract pertains to activities subject to the prohibition on participation by excluded entities.

3. The Accounting Department will maintain an up-to-date list of contractors in an approved format and will make the list available to the personnel responsible for exclusion screening of such parties.

4. The Compliance Officer will ensure that an exclusion check of contractors is conducted prior to entering into a business contract with the contractor and at least every 30 days thereafter.

5. Any matches identified in the ongoing exclusion screening process for contractors will be reviewed and resolved by the Compliance Officer. If the exclusion check indicates that a contractor has been excluded from federal healthcare programs, the Compliance Officer will decide as to whether the contract pertains to activities subject to the prohibition on participation by excluded entities. The contract will be immediately terminated if the goods or services are subject to the prohibition on participation by excluded entities.

6. The Compliance Officer will consult with legal counsel if DePaul has been reimbursed for goods or services from the excluded individual or entity.

7. The indicated exclusion will be reported as a violation of the Compliance Program and investigated and reported in accordance with the Reporting and Investigation of Compliance Concerns Policy and Procedure.

8. The Compliance Officer will ensure that all contracts entered into by DePaul will contain a certification that the federal or state government does not exclude the contractor, its employees, or subcontractors.

III. ***Applicable to Ordering/Prescribing Physicians and Other Healthcare Practitioners:***

1. DePaul will ensure that an initial exclusion check is conducted on each physician and healthcare practitioner who authorizes, prescribes, or orders goods or services funded by Medicaid, Medicare, or other federally funded healthcare programs. An

exclusion check is a search of the following sources to determine if the party's name appears on any of the lists:

- U. S. Department of Health and Human Services, Office of Inspector General's (OIG) List of Excluded Individuals and Entities (LEIE) available on the website at http://exclusions.oig.hhs.gov
- The System for Award Management (SAM) available on the SAM website at https://www.sam.gov
- ***For New York Agencies only:*** NYS Medicaid Fraud Database available on the NYS Office of Medicaid Inspector General (OMIG) website at https://omig.ny.gov/medicaid-fraud/medicaid-exclusions

2. Any DePaul department or program providing healthcare services that require an authorization, order, or prescription by a physician or other healthcare practitioner will ensure that an initial exclusion check is conducted on each physician or practitioner who authorizes, orders, or prescribes goods or services reimbursed by Medicaid, Medicare, or other federally funded healthcare programs.

3. The department or program will maintain an up-to-date list of physicians and practitioners who authorize, order, or prescribe Medicaid, Medicare, or other federally funded healthcare program services. The list will be maintained in an approved manner and be made available to the personnel responsible for the exclusion screening of such parties.

4. The Compliance Officer will ensure that an exclusion check of all physicians and practitioners who authorize, order, or prescribe healthcare goods or services provided by DePaul is conducted at least every 30 days.

5. Any matches identified in the ongoing exclusion screening process for physicians and practitioners will be reviewed and resolved by the Compliance Officer. If the exclusion check indicates that a physician or practitioner has been excluded from federal healthcare programs, the services or goods will not be billed to Medicaid, Medicare, or other federally funded healthcare programs. The Compliance Officer will consult with legal counsel if DePaul has been reimbursed for goods or services authorized, ordered, or prescribed by an excluded physician or practitioner.

6. The indicated exclusion will be reported as a violation of the Compliance Program and investigated and reported in accordance with the Reporting and Investigation of Compliance Concerns Policy and Procedure.

## Monitoring for Compliance with Policy:

1. The Compliance Officer will ensure the results of all exclusion checks are maintained for a period of at least six years.

2. The Compliance Officer is responsible for monitoring this Policy for compliance and reporting results quarterly to the Compliance Committee and the Board, along with any recommendations for remedial actions or improvements to the program.

3. An annual audit of employment applications, Board appointments, and contractors (as defined by this Policy) with which DePaul enters into a contractual relationship will be conducted by the Compliance Officer to verify that this policy is enforced. A report of this audit will be made to the Compliance Committee and Board, along with any recommendations for remedial actions or improvement to the process as part of the annual compliance report.

## Sanction Statement:

Non-compliance with this policy may result in disciplinary action, up to and including termination.

## Compliance Statement:

As part of its ongoing auditing and monitoring process in its Compliance Program, DePaul will review this policy based on changes in the law or regulations, as DePaul's practices change, and, at minimum, on an annual basis. Additionally, this policy will be tested for effectiveness on an annual basis or more frequently as identified in accordance with DePaul's Compliance Program. Testing will include but is not limited to ensuring that the policy is appropriately followed; the policy is effective; the policy has been disseminated to all Affected Individuals, who will also be notified of any updates or changes.

Tracking of the criteria above and results of this testing will be completed by the Compliance Officer, or designee. Additionally, results will be reported to the Compliance Committee and Governing Body on a regular basis.

## Record Retention Statement:

DePaul will retain this policy and all subsequent revisions, and any related documentation will be retained for a period of, at minimum, six years.