

MOHAWK VALLEY HEALTH SYSTEM

2024 Mandatory Education Module



Corporate Compliance



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Compliance Training Objectives



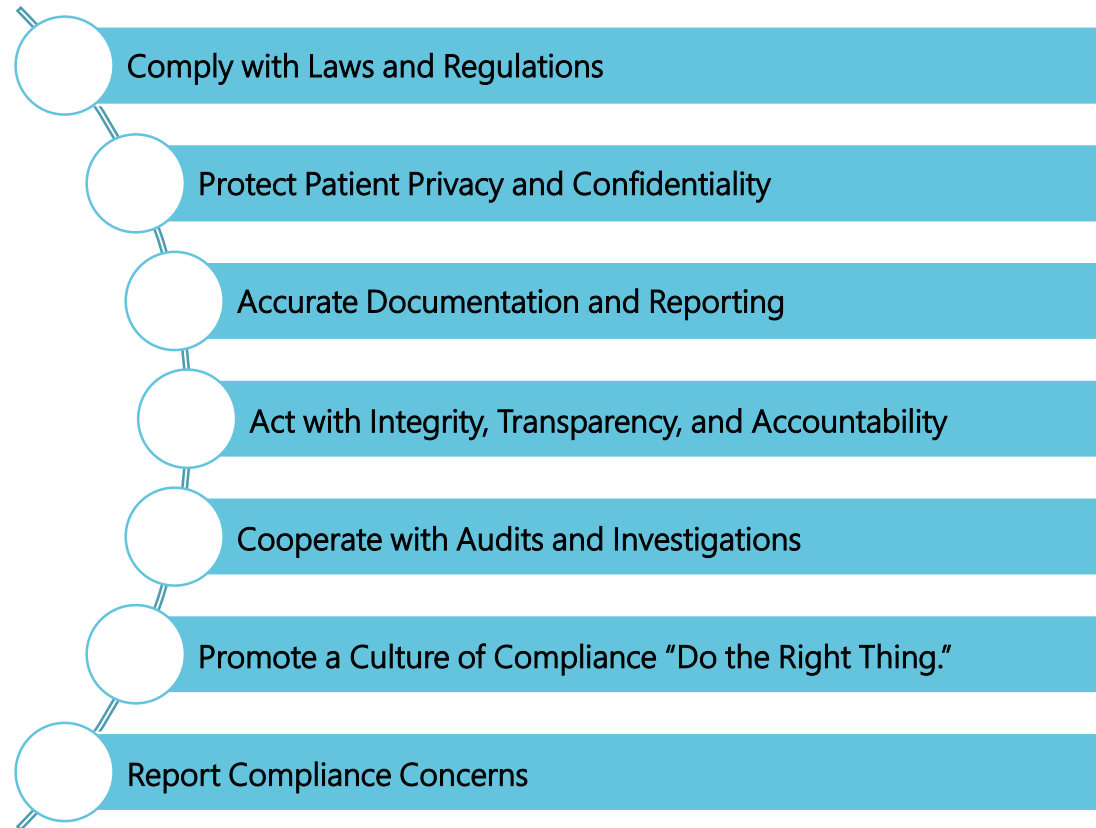
After completing this course, you should understand:

- ✓ Importance of Compliance in the workplace
- ✓ Understand Laws and Regulations
- ✓ Promote Ethical Conduct
- ✓ Protect Confidentiality and Data Security
- ✓ Foster Accountability and Reporting

Doing the Right Thing!

Employees play a critical role in upholding legal and ethical standards to ensure the delivery of safe, high-quality care while protecting patient privacy and confidentiality.

Some key responsibilities that employees must adhere to are:



What is Corporate Compliance?



It is about the prevention, detection, collaboration and enforcement of all applicable laws, regulations, policies and procedures while conducting business.



Creates a culture that encourages ethical conduct and a commitment to compliance with the law.



Emphasizes the importance of acting with Integrity and making ethical decisions.



Compliance encourages issues to be reported and resolved.



Compliance is a mechanism for constant monitoring of MVHS systems.

What is an "Effective Compliance Program"?

Regulatory agencies such as Centers for Medicare & Medicaid Services (CMS) require that our organization implement and maintain an effective compliance program.



Understanding the Seven Elements of a Compliance Program



1. Written Policies, Procedures, and Code of Conduct

- In our organization, written policies, procedures, and the code of conduct serve as essential guidelines for ensuring ethical conduct, compliance with laws and regulations, and the delivery of high-quality services.

2. Compliance Officer, Compliance Committee, and High-Level Oversight

- Maintaining integrity, ethics, and compliance with laws and regulations is paramount to MVHS. To ensure this, we've established robust compliance oversight mechanisms.
- A dedicated compliance officer, leads the charge in developing, implementing, and monitoring our compliance program. Additionally, our Compliance Committee, comprising experts from various Senior leadership disciplines, advises and supports the Compliance Officer in their role.
- High-level oversight from our senior leaders and board of directors provides strategic direction and ensures that compliance remains a top priority throughout the organization."

Understanding the Seven Elements of a Compliance Program (continued)

3. Effective Training and Education

- Compliance training is provided to new hires upon their entry to the organization, annually thereafter, and continuously as needed. This ensures that individuals thoroughly understand their roles and responsibilities, and acquire the skills needed to recognize, address, and report instances of fraud, waste, abuse, and non-compliance.

4. Effective Lines of Communication

- Our goal is to foster a culture of transparency, accountability, and compliance within the organization. We empower individuals to speak up without fear of retaliation. (Refer to the Non-Retaliation policy).

5. Well-Publicized Disciplinary Standards

- Disciplinary standards are enforced to address potential violations and promote good faith participation.
- These standards ensure clarity and expectations for reporting compliance issues, assisting in investigations, and sanctions for non-compliant behavior.



Understanding the Seven Elements of a Compliance Program (continued)

6. Auditing and Monitoring

- Internal and external audits are conducted and documented in the compliance department and throughout the organization.
- Routine auditing and monitoring of compliance risks are essential components of a compliance program, helping to identify, address, and prevent instances of non-compliance and ensure adherence to rules and regulations.

7. Responding to Compliance issues

- As part of our commitment to compliance and integrity, it's important to understand how our compliance team responds to issues that arise.
- Any concern that comes into the compliance office will be promptly identified, thoroughly investigated, assessed and appropriate action taken. Communication and transparency through the process will be provided to individuals that reported.



Code of Conduct- Know What is Expected From You

The Code of Conduct serves as a guiding framework for ethical behavior and compliance within our organization.

Purpose: Act with honesty, integrity and transparency in all interactions and transactions. Familiarize yourself with the Code of Conduct and understand how it applies to your roles and responsibilities. A copy of the Code of Conduct can be found on the Intranet.

Compliance with Laws and Regulations: Adhere to all applicable laws, regulations, and company policies relevant to your role. Understand any conflict of interest you may have and report them to the Compliance Office.

Prevention of Fraud, Waste & Abuse (FWA): Policies help safeguard the organizations resources, including financial assets property and reputation. Identifying and addressing FWA can preserve resources for their intended purpose.

Reporting Violations and Concerns: Everyone has a duty to report any violations of the Code of Conduct, unethical behavior, fraud, waste, abuse, or other compliance concerns observed or that you become aware of.

Steps to report a violation: Discuss with your supervisor or immediate supervisor, Contact your Compliance Officer, call the compliance hotline 1-800-954-9418.



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Understanding what Non-Compliance is:

Non-compliance is conduct that does not meet the guidelines required for regulatory, State, Federal, the Code of Conduct, and MVHS policies and procedures.



What are some risk areas that non-compliance can be found in?



Fraud, Waste and Abuse

Fraud

Knowing and willful acts of deception or misrepresentation with the intention of obtaining unauthorized benefits or payments.

Intentionally submitting false information to the government or government contractor to receive money or a benefit.

Waste

Practices that directly, or indirectly result in unnecessary costs to federal programs, such as overusing services.

Unnecessary tests and procedures can lead to increased healthcare costs. Example: Overuse of imaging tests such as X-rays, CT scans, and MRIs.

Abuse

Actions that may, directly or indirectly, result in unnecessary costs to federal programs.

Paying for items or services when there is no legal entitlement to that payment, and the provider has knowingly and/or intentionally misrepresented the facts to obtain payment.

False Claims Act

- Imposes liability on persons who “knowingly and willfully” make materially false or fraudulent statements with the delivery or payment of health benefits.

- Prohibits:

- ☐ Presenting false claims (for a service that was not provided).
- ☐ Failing to return government funds.
- ☐ Retaliation for bringing forward a claim (Non-Retaliation Policy).
- ☐ Civil Penalties can be imposed.



Example of a False Claims Act Violation

A physician submits claims for payment to a federally funded healthcare program for procedures that were not actually performed or for treatments/services that were medically unnecessary.

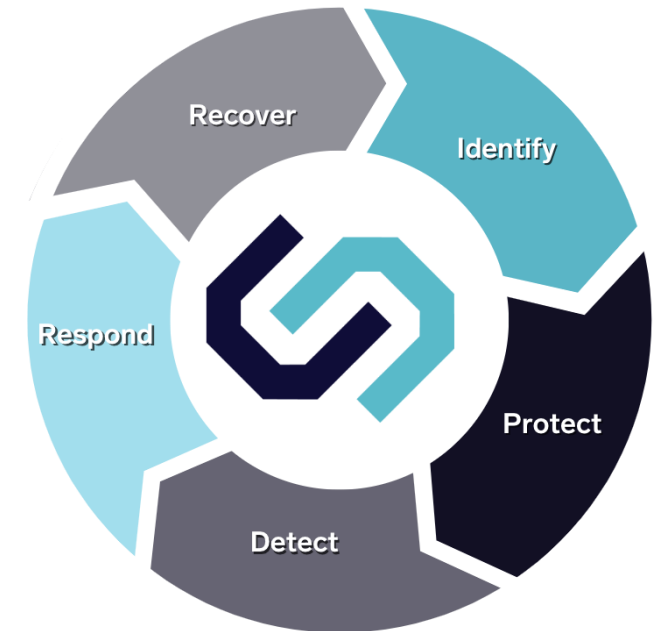
Federal Deficit Reduction Act ("DRA") (Whistleblower)

The DRA is intended to reduce fraud, waste, and abuse in federal and state health care programs. The following is required for the DRA;

- (a) MVHS must provide written policies and explain detailed requirements for detecting and preventing fraud, waste and abuse.
- (b) Educate all employees about:
 - False Claims Act
 - Detecting and Preventing Fraud, Waste and Abuse
 - Whistleblower protections

What is a Whistleblower?

A whistleblower is anyone who reports insider knowledge of illegal or fraudulent activities occurring in an organization.



Non- Retaliation Policy

MVHS encourages individuals to report suspected violations of federal and state regulations as well as policies and procedures without fear of retaliation provided that the reports are made honestly and in good faith.

When reporting a concern, you will be protected from;

- ✓ Being punished
- ✓ Treated differently
- ✓ Harassed



Reporting of Concerns and Non-Retaliation :

Any individual who has any concerns which violates any other law or policy, by any individual, should immediately report these concerns to their manager, Human Resources, Compliance, or call the anonymous Compliance hotline.

All reports of potential retaliation or intimidation described above must be immediately reported to the Compliance Office at compliance@mvhealthsystem.org.



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Anti-Kickback Statute

The Anti-Kickback Statute prohibits:

- The knowing and willful offering, paying, soliciting, or receiving of anything of value ("kickbacks") to induce or reward patient referrals or the generation of business involving any items or service payable by federal health care programs.
- *Violations can result in administrative sanctions, fines, jail terms and exclusion from participation in federal health care programs.*



Example of an Anti-Kickback Statute Violation

A healthcare provider accepts money or gifts from a pharmaceutical or durable medical equipment company in exchange for the provider referring patients to that vendor.

The Physician Self Referral Law (Stark Law)

The Stark Law prohibits:

- ▶ Physicians from referring Medicare or Medicaid patients for certain designated health services to an entity with which the Physician or an immediate family member has a financial relationship, unless an exception applies under the law.
- ▶ Examples of designated health services include, clinical laboratory services, outpatient therapy service (e.g., physical, occupational, and speech therapy), radiology and certain other imaging services, and durable medical equipment.

Example of a Stark Law Violation

An orthopedic physician refers all of his patients to his privately owned physical therapy center without giving the patients other options or notice that he owns the physical therapy center.

Conflict of Interest

What is a Conflict of Interest?

- A conflict of Interest in healthcare occurs when personal or financial interests interfere with professional responsibilities or decision-making, potentially compromising the objectivity, integrity, or trustworthiness of healthcare providers, Board Members or employees of MVHS.

Examples of a Conflict of Interest?

- Prescribing medications or treatments based on financial incentives from pharmaceutical companies.
- Referring patients to facilities or services in which the healthcare provider, Board member or employee has a financial interest.

How do you report a Conflict of Interest?

- Report to the Compliance Office any suspected Conflict of Interest.
- Annually complete Conflict of interest Survey that is sent to the Board of Directors, Healthcare Providers and other key personnel
- It is your responsibility to report to the Compliance Office if you feel you have a Conflict.



What do you do if you suspect a Conflict of Interest?

- 1) Contact the compliance office at compliance@mvhealthsystem.org or
- 2) Contact the Compliance Officer at 315-624-5146.

Reporting Non-Compliance Compliance Is Everyone's Responsibility!

Promptly report any concerns about violations of the Code of Conduct, unethical, or illegal activities to any of the following:

1. Contact your Manager or supervisor;
2. Notify Human Resources;
3. Call or email the Compliance Office;
 - ▶ Compliance@mvhealthsystem.org
 - ▶ Compliance Officer: **Tanya Enigk**
 - ▶ Anonymous Compliance Hotline 1-800-954-9418



COMPLIANCE HOTLINE

- 24 hours a day, 7 days a week
- Anonymous Reporting Available

1-800-954-9418 | mvhealthsystem.ethicspoint.org

If you have a concern about unethical, illegal or inconsistent activities –
Speak up, it's your business.
Discuss it with your manager, supervisor, Human Resources
or call the anonymous Compliance Hotline.

The Mohawk Valley Health System (MVHS) and affiliates prohibit any form of
retaliation or intimidation against an individual for reporting a good faith concern.

The Compliance Hotline allows you to confidentially
ask questions or report concerns.



3/25/23 | Authorized by Marketing and Communications | DO NOT TAKE DOWN

(You will see this poster around MVHS)



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If you suspect or know of a Compliance violation contact Compliance at:

Compliance@mvhealthsystem.org

or

Tanya Enigk, VP/Chief Compliance Officer

315-624-5146

tenigk@mvhealthsystem.org

Brandi Baxter, Privacy Officer-Compliance Manager

315-624-5117

bbaxter@mvhealthsystem.org

Jaclyn Fahey, Compliance Specialist

315-624-5172

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