



King's Daughters Medical Center

Annual General Compliance Training

November 2021

King's Daughters Commitment

- King's Daughters is committed to compliance with applicable laws, rules and regulations, including the Anti-Kickback Statute, Stark Law, and other federal healthcare laws and regulations.
- At the direction of the Board of Directors, King's Daughters established a comprehensive compliance program through the establishment of the Compliance & Integrity Department.
- The Compliance & Integrity Program ("Program") aligns with the Office of Inspector General (OIG) Guidelines and the Federal Sentencing Guidelines. The Program contains the following seven elements: (i) written policies, procedures and Code of Conduct; (ii) compliance officer and compliance committee; (iii) training and education; (iv) effective lines of communication for reporting concerns; (v) enforcement and discipline of policies and procedures; (vi) internal monitoring and auditing program; and (vii) response and prevention program to detect, deter and prevent offenses and violations of fraud, waste and abuse.

Seven Elements of the OIG Model Compliance Program



Policies and
Procedures



Compliance
Officer and
Compliance
Oversight



Screening
Employees,
Contractors,
Physicians,
Board
Members



Education



Auditing and
Monitoring



Corrective
Actions to
Identified
Problems



Enforcement
of Violations



Heather Marcum
Compliance & Privacy Officer
x80161

How do I report suspected compliance violations?

All King's Daughters team members, providers, and contractors/vendors are required to report concerns about actual, potential or perceived misconduct to the Compliance & Integrity Department. One may use any of the following reporting tools:

- Call the Compliance Hotline at (606) 408-4145 or (877) 327-4145;
- Call the Lighthouse Services Hotline at (844) 940-0003 which is an independent third-party hotline provider contracted by the Health System as an additional anonymous reporting tool;
- Complete the Compliance Concern Form found on the intranet;
- Contact Compliance Officer, Heather Marcum @ (606) 408-0161;
- Contact your supervisor, director or Vice President;
- Email corporatecompliance@kdmc.kdhs.us (not anonymous);
- Send written correspondence intercompany to 2201 Lexington Avenue, Ashland, KY 41101 Attn: Compliance & Integrity Department.



Inducements to Patients

- Social Security Act – enacted as part of the Health Insurance and Accountability Act of 1996 (HIPAA), prohibits providers of Medicare or Medicaid payable services from offering remuneration to beneficiaries.
- Examples of remuneration are:
 - Waivers of copayments and deductible amounts
 - Providing items or services for free or for other than fair market value
 - Providing gifts of more than nominal value



So how does this apply to team member's everyday work?

- Neither KDMC nor team members are permitted to give or receive cash, either individually or collectively, to patients or families
- Social work team can access resources to assist patients in some circumstances
- As part of service recovery, and occasionally through grant funding, KDMC provides small amenities and/or gas cards to patients/families
- Gifts to patients/families are limited to a retail value of no more than \$15 individually, and no more than \$75 annually per patient
- Patient representative team tracks items provided to patients and families
- If you perform service recovery to a patient, please make your manager or supervisor aware for tracking purposes

Federal False Claims Act

The False Claims Act provides for civil liability for individuals and organizations that knowingly submit, or cause the submission of, false claims to the Federal Government.

Examples include, but not limited to, claims for services that:

- Have not been provided;
- Are not supported by documentation in the patient's medical record;
- Are paid or being paid by another claim; or
- Are incorrectly coded



Fraud, Waste, and Abuse

King's Daughters is committed to preventing, detecting, reporting, and correct fraud, waste, and abuse. Examples of fraud, waste, and abuse include:

- Misrepresentation of the type or level of service provided;
- Misrepresentation of the individual rendering service;
- Billing for items and services that have not been rendered;
- Billing for services that have not been properly and timely documented;
- Billing for items and services that are not medically necessary;
- Seeking payment or reimbursement for services rendered for procedures that are integral to other procedures performed on the same date of service (unbundling);
- Seeking increased payment or reimbursement for services that are correctly billed at a lower rate (up-coding)
- Misusing codes on a claim; and
- Charging excessively for services or supplies.

Stark Law & Anti-Kickback Statute

Stark Law

Prohibits physicians from referring Medicare patients to an entity with which the physician or an immediate family member has a financial relationship.

Anti-Kickback Statute

Prohibits receiving or offering to exchange anything of value in an effort to induce or reward the referral of healthcare program business



How does the Health System prevent violations of the False Claims Act?

- King's Daughters established a comprehensive compliance program through the establishment of the Compliance & Integrity Department.
- Here are some examples of compliance program activities:
 - Internal Audit's auditing efforts;
 - Compliance & Integrity Department's monitoring and auditing compliance plan;
 - Contracting with external resources to provide reviews;
 - Revenue Cycle's data mining and monitoring;
 - Leaders' self-monitoring their department risks;
 - Annual Compliance Risk Assessment;
 - Review of the Office of Inspector (OIG) Work Plan which identifies risks;
 - Follow up on concerns reported to the Compliance & Integrity Department

Overpayments

The Affordable Care Act requires that a person (e.g., provider, hospital, medical office) who received a Medicare or Medicaid Overpayment to report and return the Overpayment.

What is an Overpayment?

A Medicare or Medicaid overpayment is “any funds that a person receives or retains to which the person, after applicable reconciliation, is not entitled.”

Examples of Overpayments include, but are not limited to, the following:

- Billing the wrong level of care for an office visit;
- Separately billing services which should have been bundled into one bill;
- Billing for an MRI when a CT was performed;
- Billing for a service which was not properly documented; or
- Billing for a service which was not medically necessary.

It doesn't matter if an Overpayment is a mistake or not intentional. If Medicare or Medicaid paid an excess amount, an Overpayment occurred.



Overpayments

- An Overpayment must be reported and returned no later than sixty (60) days after the date on which the Overpayment was identified.
- Failure to report an Overpayment may result in liability under the False Claims Act.
- If you suspect an Overpayment has occurred, immediately contact your supervisor or the Compliance & Integrity Department.



Medical Necessity

- Medical Necessity is a term which can be complex for all participants in healthcare.
- A provider's understanding of medical necessity may be different from that of a patient, patient's family or third-party payer. Different participants sometimes apply the term in different ways.
- CMS gives a definition of Medical Necessity in the Social Security Act:
 - *"...no Medicare payment shall be made for items or services that are not reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member"*
- Because the diagnosis drives the determination of medical necessity, it is important that patient's history and assessment is thoroughly documented in the medical record.
- Medicare issues National Coverage Determinations (NCDs) and Local Coverage Determinations (LCDs) to provide guidance on coverage requirements/limitations for specific treatments or procedures. NCDs and LCDs are available on the internet.
- Medical necessity becomes more complex with third-party payers who often have specific coverage rules for specific treatments or procedures. If you have questions regarding medical necessity, please contact leaders in your work area or the Compliance and Integrity team.

Preventing Overpayments

To reduce the chance that an overpayment could be made, King's Daughters takes these actions:

Monitoring

- Billing functions for professional, hospital, and home care services are regularly monitored by applicable departments;

National and Local Coverage Determinations

- National and Local Coverage Determinations identify Medicare's payment and coverage criteria for certain tests and procedures. Many of these National and Local Coverage Determinations are 'built' in EPIC and generate prompts when entering a test or procedure;

Audits

- Audits are performed by Internal Audit, Compliance & Integrity, and external contractors.

Reporting

- Team members are required to report any suspected concern with billing activities which may result in overpayment. Reports can be made using any of the available reporting methods.

National and Local Coverage Determinations

- One way Medicare provides guidance regarding medical necessity is through the issuance of National (federal) Coverage Determinations and Local (regional) Coverage Determinations (NCD/LCD) (see Administrative Policy A(7))
- NCD/LCD document identifies the conditions under which payment will be made for certain tests, services and procedures.
- Department directors are responsible to be knowledgeable of those NCD/LCDs which pertain to the services provided by the Department and ensure the NCD/LCD elements, as applicable, are met
- Elective ordered tests, services and procedures which do not meet NCD/LCD requirements should be processed in accordance with Administrative Policy A(5), Issuance of Advance Beneficiary Notice

Potential Consequences of Noncompliance

Failure to comply with applicable laws, regulations, and CMS requirements may lead to serious consequences, such as:

- Contract Termination
- Criminal Penalties
- Civil Monetary Penalties
- Exclusion from Federal Health Care Programs



EMTALA



- Emergency Medical Treatment and Active Labor Act (EMTALA)
- EMTALA is a federal law designed to assure access to emergency services regardless of ability to pay.
- When a patient presents to the ED, a provider must conduct a medical screening examination for an emergency medical condition, including active labor, regardless of the individual's ability to pay.
- Hospitals are required to provide stabilizing treatment for patients with emergency medical conditions. If they are unable to stabilize patient within its capability, or if the patient requests, an appropriate transfer should be implemented.

HIPAA and IT Security



Notice of Privacy Practice

- HIPAA requires King's Daughters to provide each patient a "Notice of Privacy Practice" which:
 - Describes how the facility may use and disclose PHI
 - Advises the patient of his/her privacy rights
- King's Daughters must attempt to obtain a patient's signature acknowledging receipt of the Notice, EXCEPT in emergency situations. If a signature is not obtained, the reason must be documented.
- The registration process is critical in distributing the Notice of Privacy Practices and getting patient signatures.

Business Associates

- HIPAA also applies to business associates. A business associate is any person or organization who provides services to King's Daughters which involves use or disclosure of PHI.
 - Examples: Billing vendors, Tri-Data, Maintenance service providers, etc.
- To comply with HIPAA, all business associates must have business associate agreements with King's Daughters.
 - King's Daughters can be held responsible if our business associates are not compliant with HIPAA.
- If you utilize a vendor who may qualify as a business associate, please contact Legal Services to assure an appropriate agreement is in place.

Protecting Patient Information

- As a King's Daughters Team Member, maintaining a patient's privacy is part of your job. You should access or view a person's PHI only when it is required for your job. Simply because you are able to see a person's PHI does not mean it is permissible.
- King's Daughters routinely conducts audits of access to patient records and our systems to ensure proper access by Team Members
- All patients are entitled to privacy and confidentiality. Do your part and only look at the Minimum Necessary information you need to do your job.



Protected Health Information

Protected Health Information (PHI) is information you create or receive in the course of providing treatment or obtaining payment for services. It includes:

- Information related to the past, present or future physical and/or mental health or condition of an individual; the provision of healthcare to an individual; or the past, present or future payment for the provision of healthcare; **AND**
- Includes at least one of the **18 personal identifiers OR** there is a **reasonable basis to believe** the information can be used to identify the individual.
- Information in all formats – oral, written, electronic – including videos, photographs, x-rays, etc. - must be protected
- It **DOES NOT** include health information about individuals who have been deceased more than 50 years.

PHI Identifiers

PHI identifiers are

1. Name
2. Postal Address
3. All elements of dates except year
4. Telephone number
5. Fax number
6. Email address
7. URL address
8. IP address
9. Social Security Number
10. Account numbers
11. License numbers
12. Medical record number
13. Health plan beneficiary number
14. Device identifiers & their serial numbers
15. Vehicle identifiers and serial number
16. Biometric identifiers
17. Full face photos & other similar images
18. Any other unique identifying number, code or characteristic

How can PHI be used?

- Providers are permitted to use or disclose PHI for:
 - Treatment
 - Payment
 - Healthcare operations (e.g., legal, medical staff/peer review, audit, business management)
 - The individual patient who is the subject of the PHI, and
 - Other uses and disclosures required by law
 - In all other instances, a written authorization from the patient is needed.
 - Whenever in doubt about release of information, contact Medical Records Department, Privacy officer, or Legal Services for guidance.

Patient Rights Under HIPAA

- Right to access and receive a copy of one's own PHI (paper or electronic format)
- Right to request amendments to information
- Right to request restriction of PHI uses and disclosures
- Right to restrict disclosure to health plans for services self-paid in full
- Right to request alternative forms of communications
- Right to request an accounting of disclosures of PHI

Any questions regarding these rights, please call the Privacy Department at x80161 or x80455

Privacy Tips

- Never take unsecured PHI home with you
- Speak quietly in work areas
- Avoid using patient names or discussing cases in public areas
 - We live in a small community, and even the smallest details might be identifiable to someone who overhears.
- Use the shred bins located throughout King's Daughters to shred documents (that do not need to be preserved) with PHI
- Always obtain at least two patient identifiers before handoff of documents or discussing patient information

Privacy Monitoring

- The Privacy Department has monitoring capabilities through implemented artificial intelligence and machine learning tools
- Team Members who access medical records unrelated to their job may face corrective action including discipline, suspension, or termination of employee

KD policies:

- Confidentiality of PHI (E8)
- Minimum Necessary Requirements (Privacy Manual)



Examples of Inappropriate Access

- Accessing the records of an ex-spouse or ex-partner to “see how they are doing”
- Accessing records to “check on a patient” because you saw a news story about the patient and wanted to see their status
- Accessing the records of a family member when you are not involved in their care
- Accessing medical records of a neighbor out of curiosity
- Accessing medical records of a co-worker in the hospital to “see how they are doing”
- Accessing your child’s or spouse’s medical records to check their health status


Social Media and Patient Privacy



- NEVER share identifiable information about patients on social media
- Considered by Privacy Department to be a high risk activity
- Corrective action can include termination

THINK

BEFORE YOU POST ONLINE OR HIT SEND



**Take into
consideration:**

- Who might be able to read this?
- Am I posting in anger?
- Could someone feel disrespected?
- Does my post include information to identify the individual?
- Am I revealing too much about myself?
- Am I showing a bad side of myself?
- Could someone misinterpret what I'm saying?

Why Report Privacy Concerns?

- King's Daughters is required by law to report breaches to the Department of Health and Human Services, Office of Civil Rights.
- When King's Daughters reports a breach, we are essentially reporting a violation of the Privacy Rule (HIPAA).
- If HHS suspects that the breach or violation resulted from “willful neglect,” they will conduct a compliance review.
- A fine of up to \$50,000 per violation can be assigned for each HIPAA violation

KDMC Password Recommendations



- Passwords should be difficult to guess.
- Passwords should be as complex as possible.
- Do not use the “Remember Me” feature in Windows
- 12 Character Minimum
- Password Change Interval = every 2 years

User Credentials

- **Only log on to computer systems with your own user ID and password. Never use someone else's.**
- You will be held responsible for all activity under your user ID
- Log off from work stations when you walk away from it
- Do not share passwords, ID badges, or other access credentials with anyone.
- Password complexity is an important deterrent to unauthorized access.



Back to Basics

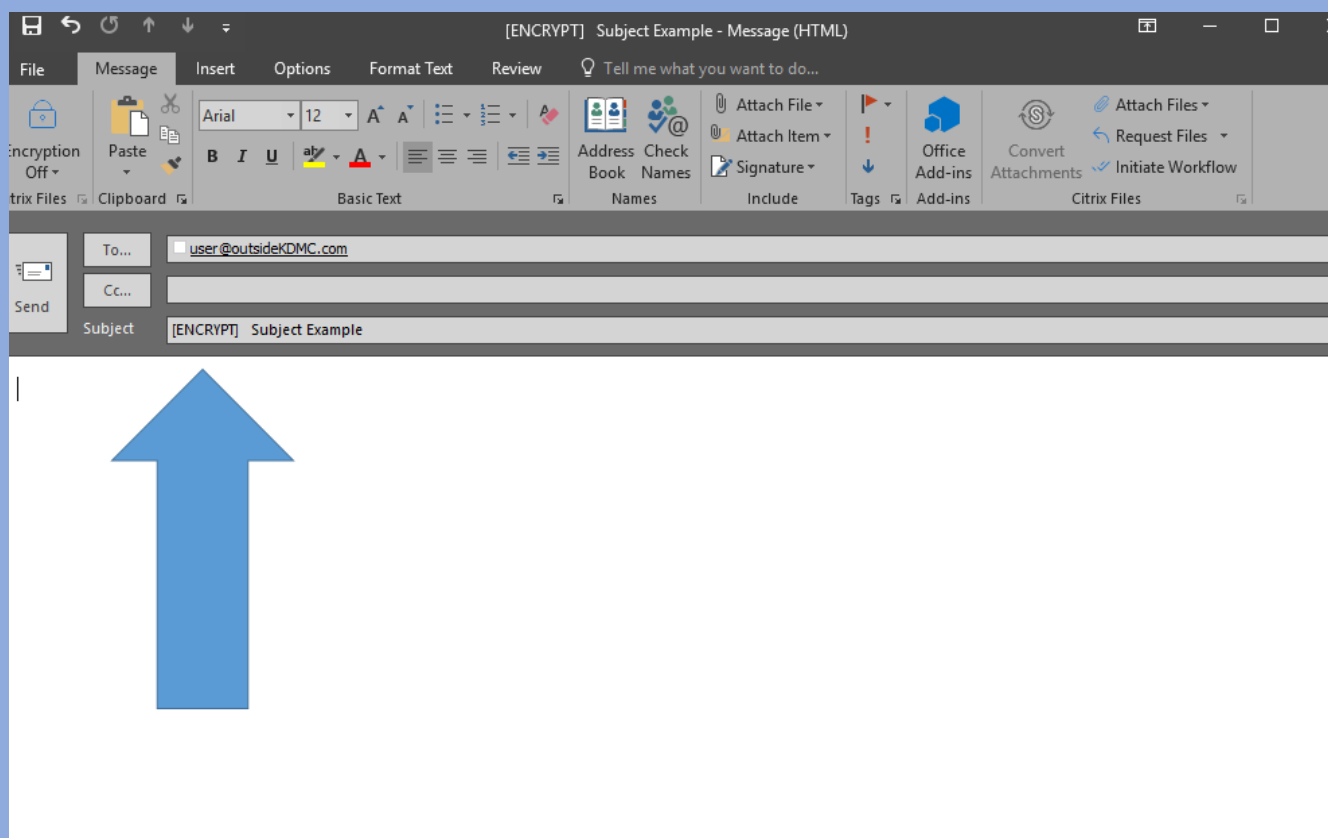
- Double check fax numbers and email addresses before sending information
- Be cautious about clicking links on web pages
- Lock offices, desks, cars
- Don't click on links you didn't ask to be sent
- Lock files with encryption
- Enable passwords and encryption on devices

Email Security & Protection



- Do not send confidential information in an email, in either the message or in an attachment, unless the communication line is secure and encrypted.
- If you do not know the sender of an email do not open the email, if you inadvertently open the email do not open attachments or select any hyperlinks.

Secure Encrypted E-Mail



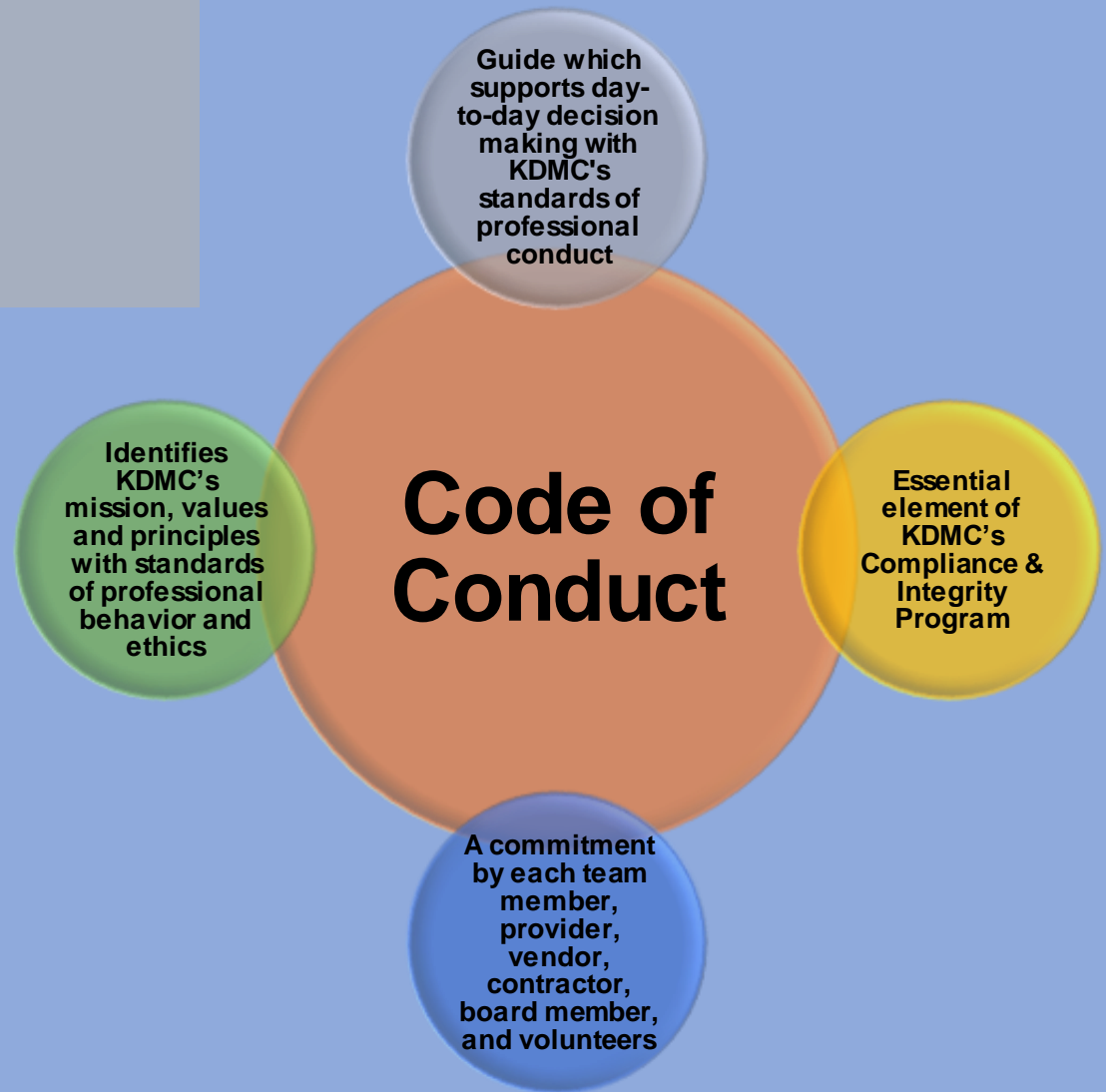
Do not send confidential information in an external email, in either the message or in an attachment, unless the communication line is secure and encrypted.

Email Security and Protection



- Do not link your personal online accounts to your work email address
- Do not use KD computers for your personal financial transactions such as online banking and online shopping
- Do not access outside email such as Gmail, or Google Drive from KD computers
- Any information stored on KD computers is property of KD and shall not be considered private

Code of Conduct



Code of Conduct

- King's Daughters Medical Center is committed to honest and ethical behavior and to conducting our business with integrity. The practice of behaving honestly, ethically and with integrity is an individual responsibility. We make decisions about how to conduct ourselves every day as we go about our work. Each of us is accountable for the actions that we choose to take.
- The Medical Center's Code of Conduct is the keystone of its corporate integrity philosophy and communicates its ethical business standards. The Code of Conduct serves as a cultural compass for team members, management, vendors/contractors, volunteers and others who interact with the Health System. It is an essential element of our Compliance & Integrity Program.
- The Compliance & Integrity Department oversees the Medical Center's Compliance & Integrity Program and ensures the Health System maintains its commitment to conducting our business with integrity. The Compliance & Integrity Program is a partnership among all of us to make the right business choices.

Conflicts of Interest

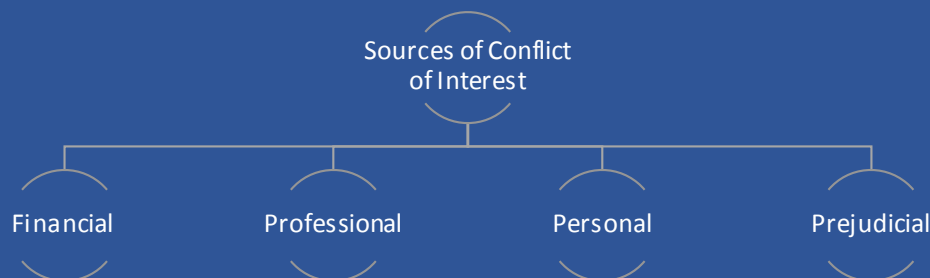
TM may not use their positions to profit personally at the expense of the Medical Center.

Examples of Potential Conflicts:

- Provide consulting services to competitor
- Responsible for purchasing medical devices and you own a medical device company
- Directly supervising a close family member or in a position to make decisions to benefit the family member

Team members are asked to report potential conflicts of interest:

- Upon hiring / on boarding process
- Any time a conflict develops (don't wait until each year's annual training)
- During annual compliance training



Gifts and Gratuities

King's Daughters Code of Conduct identifies:

- **Team members may accept unsolicited business courtesies from vendors, excluding cash, up to \$50.00.**
 - For this reason, we are most often unable to accept vendor offers for complimentary conference attendance.
- **Team members and contracted providers may accept an unsolicited gift, excluding cash, from a patient or a patient's family member of less than \$100.00.**

NOTE: Mastercard and/or Visa gift cards are considered cash.



Examples of acceptable gifts are:

- \$25.00 gift cards for Starbucks, Texas Roadhouse, Cheddars
- \$50.00 Cinemark movie pass
- Flower arrangement, candle
- Edible Arrangements bouquet, a cake from Tipton's or cookies from Sweet Caroline's

Gifts to Medical Staff and/or Immediate Family



- Non-monetary compensation to physicians and their immediate family is regulated by CMS
- Examples of non-monetary compensation are: non-working meals, gift baskets, physician appreciation events, holiday parties, sporting events
- Medical Staff Office tracks non-monetary compensation to physicians
- \$429 annual limit for 2021
- Please report any gift to a provider or provider family member to Medical Staff Office or Compliance and Integrity

Workplace Sexual Harassment policy J(4)

King's Daughters strives to maintain a workplace that fosters mutual team member's respect and promotes harmonious, productive working relationships. In providing a productive working environment, King's Daughters believes that its team members should be able to enjoy a workplace free from all forms of discrimination, including harassment on the basis of race, color, religion, gender, national origin, age, disability, veteran status, uniformed service, marital status, pregnancy, sexual orientation, gender identity, or any other status or characteristic protected by law.

It is King's Daughters policy to provide an environment free from such harassment.

It is a violation of policy for any team member, whether a manager, supervisor or co-worker, to harass another team member. Harassment of third parties by King's Daughters team members, or harassment by third parties of King's Daughters team members, is also prohibited.

Please report suspected or violations to the Human Resource Department, supervisor, manager, director, or to the Compliance and Integrity Department

Conflict vs Bullying

Conflict

- Disagreement or argument in which both sides express their views
- Equal power – mutual engagement
- Equal emotional reaction
- Happens occasionally
- Can be accidental
- Not seeking power or attention
- Feelings of remorse and responsibility
- Effort to solve problem

Bullying

- Goal is to hurt, harm, or humiliate the victim
- Imbalance of power – one sided
- Strong emotional reaction from victim
- Happens repeatedly
- Intentional, threatening
- Seeking power and control
- No remorse – blames victim
- No attempt to stop

What to do:

If you feel that you are being bullied, discriminated against, victimized or subjected to any form of harassment:

- DO
 - Firmly tell the person that his or her behavior is not acceptable and ask them to stop. You can ask a person you trust, such as a supervisor or team member to be with you when you approach the person.
 - Document the events in RL6 reporting system. Record:
 - The date, time, and what happened in as much detail as possible
 - The names of witnesses
 - The outcome of the event
 - Remember, it is not just the character of the incidents, but intent of the behavior and the number, frequency, and especially the pattern that can reveal bullying or harassment
 - Keep copies of any letters, memos, e-mails, etc., received from the person
 - Please report suspected or violations to the Human Resource Department, supervisor, manager, director, Risk Management Department, or to the Compliance and Integrity Department
 - If your concerns are minimized, proceed to the next level of management
- DO NOT RETALIATE. You may end up looking like the perpetrator and will most certainly cause confusion for those responsible for evaluating and responding to the situation.

Language Services & Interpreters

Federal regulations such as ACA section 1557 require health care providers to accommodate those with communication disabilities or who are non-English speaking.

teamKD



[HOME](#)

[CALL SCHEDULES](#)

[DEPARTMENTS](#)

[LEADERSHIP](#)

[TEAM TOOLS](#)

[HELP](#)

[POLICIES](#)

Resources located at teamkdhs.com under **HELP** >
Communication Resources; also refer to Administrative Policy
E35 - Interpreters

[AIMS FAC](#)

[KDOH & Offsite AIMS](#)

[Communication Resources](#)

[Family Pharmacy Refills](#)

Abuse



- Abuse, neglect, exploitation know no boundaries. Any patient, at any age can become a victim, although people who depend on others for their emotional and physical health are at high risk.
- Everyone has a responsibility to immediately report suspected cases of abuse, neglect, domestic violence, sexual assault, or exploitation to Social Services.
- Social worker is on call 24/7 and can be reached through the switch board operator.

Government or Accrediting Agency Contact

- If an agency requests information or access, in writing or in person, notify Compliance or Risk Management
- If an agency arrives at any location, notify Quality or Accreditation
- Always obtain Legal Services review PRIOR to signing any document on behalf of King's Daughters



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In Conclusion

Compliance can be summarized in a short phrase...

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Do The Right Thing

Thank you for viewing this presentation.

Please complete the following items to receive credit for this course:

1. General Compliance Training Post-Test (upper right corner of this screen)
2. Conflict of Interest (on your KDHSU To Do List)
3. Training and Code of Conduct Attestation (on your KDHSU To Do List)