













FY23 General Compliance Course

Please allow 30 minutes to meaningfully participate in this training

When you are receiving health care, you expect that:

- Recommendations regarding medications, tests, procedures and referrals will be based on the clinicians' best professional judgment and in your best interest.
- The financial aspects of your care will be handled in good faith.
- · Your health information will be kept confidential.



Aspirus has a tradition of caring for its patients, health plan members, providers, suppliers, our colleagues and communities we serve with a steadfast commitment to integrity and ethical standards.

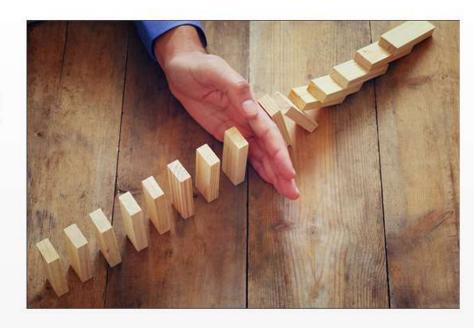
We also have a Compliance Program intended to emphasize Aspirus' commitment to the highest ethical standards of conduct and compliance with all applicable laws, regulations and Aspirus policies and procedures.



The objective of health care compliance is to improve the quality and availability of health care while controlling costs of that care. Achievement of that objective is part of everything that we do at Aspirus.

You impact the success of the Aspirus Compliance Program by:

- · Exhibiting and promoting ethical behavior.
- Following laws, rules, regulations, Aspirus policies, and our Code of Conduct.
- · Recognizing and responding to areas of risk.
- · Reporting concerns and improper activities.



The most successful companies take an integrated approach to compliance. This means that compliance is not an additional responsibility; it is inherent in the way that business is done.

The Aspirus Compliance Program is established to ensure that Aspirus operates in accordance with applicable rules and regulations and is designed to:

- · Detect violations if they occur.
- · Prevent accidental and intentional violations of law.
- · Correct any noncompliance.





The Aspirus Compliance Program can be separated into seven components, each serving a different function within the Program















The Board of Directors, Compliance Officer, and Compliance Committees have primary responsibility for the Compliance Program.



The Code of Conduct and supporting policies describe our standards and procedures that promote compliance.









We train staff through new employee orientation, annual training, and risk-based activities.







The program relies on everyone's vigilance and obligation to report any compliance concerns.





Each reported concern is investigated regardless of the subject matter or how it is received.











The Program performs a risk assessment and conducts audits to minimize risk to Aspirus.













When noncompliance is substantiated, corrective action will be initiated.















In the next part of your training, we will give you the tools you need to help support our shared mission of compliance.





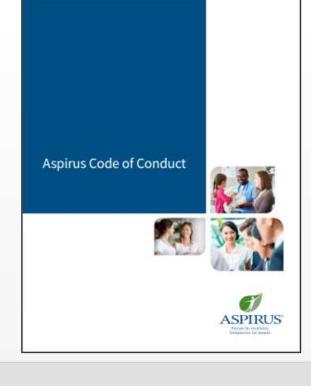
Compliance Toolkit



First, the Code of Conduct is the governing document for the entire system that defines how we follow the various regulations and best practices.

It is a great place to start when you have a question about a regulation or are working on a project that intersects with compliance.

The Code of Conduct must be observed by everyone who works with or for Aspirus.





Compliance policies also address specific compliance questions and topics and provide operational compliance requirements.

The Code of Conduct and compliance policies can be accessed through the Aspirus intranet.





You have an affirmative obligation to report any suspected or known compliance issues and to seek guidance if you are uncertain whether an activity is compliant. Failure to report misconduct may be grounds for corrective action.

Your question or concern may be reported to:

- · Your Manager or Supervisor.
- Compliance@aspirus.org.
- · The Compliance Department.
- The Compliance Helpline or SafetyZone.





The Compliance Helpline and SafetyZone allow you to report your questions or concerns anonymously.





SafetyZone, the online reporting tool, can be accessed through the Aspirus intranet as shown here.





The Compliance Department reviews all reported concerns regardless of the subject matter or how they are received. They will involve subject matter experts as needed to help with the investigation.

So that the Compliance Department can validate the concern, you should be prepared to provide as many details as possible.





Whether you report online, by phone or in person, Aspirus has a non-retaliation policy.

That means you <u>cannot</u> be punished for making reports in good faith.

Also, no one may prevent or discourage you from reporting a concern. Doing so may result in corrective action.





System-wide, how many compliance concerns do you think were reported in fiscal year 2022?



1500

1000





There were over 2500 matters reported in fiscal year 2022. That's about seven reports every day.

The Compliance Department relies on your active participation to help us validate the concern and will call upon you to help. All employees are required to cooperate with the efforts to validate the concern.



Even in a great organization where mostly everyone is trying to do the right thing the majority of the time, it is important to have an engaged workforce who can help detect and report concerns.





A compliance investigation may indicate an internal policy or procedure needs to be modified or additional education or training is needed. It may also indicate an employee engaged in misconduct.

Regardless of the findings, corrective measures will be implemented where appropriate.





Health care is a government enforcement priority because of the potential for fraud, waste and abuse.

Fraud: making material false statements or representations of facts that an individual knows to be false or does not believe to be true to obtain payment or other benefit to which they would otherwise not be entitled.

Waste: incurring unnecessary costs as a result of deficient management, practices, systems or controls.

Abuse: practices that directly or indirectly result in unnecessary costs or improper payments for services which fail to meet recognized professional standards of care.





These hallmark fraud and abuse regulations are applicable to health care institutions.

It is important to be familiar with them.

Stark Law: If a physician or his/her immediate family member has a financial relationship with a health care institution, then that physician may not refer patients to the institution for designated health care services unless an exception to the law is met.

Anti-kickback Statute: Asking for or receiving anything of value in exchange for referrals of Federal health care program business is a crime unless an exception to the law is met.

CIvil Monetary Penalties Law: Office of Inspector General has authority to assess civil monetary penalties and exclusions against an individual or entity based on violations of the Anti-kickback statute and a range of other violations.

False Claims Act: It is illegal to submit claims for payment to Medicare or Medicaid that you know or should know are false or fraudulent. You do not have to intend to defraud the government and can be punished if you act with deliberate ignorance or reckless disregard of the truth.

False Claims Act

The False Claims Act also contains provisions for individuals referred to as whistle blowers.

These individuals are protected under the law against retaliation for making claim to the government in which a lawsuit is pursued against the health care entity.





The Health Insurance Portability and Accountability Act (HIPAA) says that health care entities must safeguard the privacy and security of protected health information (PHI) of the patients they treat.

PHI may only be accessed or used if you are engaged in one of the three allowable purposes:

- 1. Patient's medical treatment or care.
- 2. Patient coding, billing, insurance or finances.
- 3. Health care operations (i.e., auditing, peer review, utilization review, etc.).

Accessing a patient record or PHI for any other use or reason is strictly prohibited.

Aspirus Policy HIPAA - Use and Disclosure of PHI for Treatment, Payment, and Health Care Operations





PHI includes any information that could reveal the identity of or link to a patient. This includes information related to the past, present or future health status of an individual that is created, collected, transmitted or maintained by a HIPAA covered entity.

There are 18 identifiers that are considered PHI, including:

- Name
- · Date of birth
- · Social security number
- · Medical record or insurance plan number
- · Photographs

If a communication (i.e., verbal, written, electronic or other) contains any of these 18 identifiers, the information is considered to be "identified."





When you are using, accessing or disclosing PHI for one of the three allowable purposes we just discussed, you must access and use the least amount of PHI necessary to accomplish that purpose (HIPAA minimum necessary rule).

Aspirus Policy HIPAA - Minimum Necessary Standards for Use and Disclosure of PHI

For example...





A person in Accounts Receivable needs names, addresses and account numbers to process payments but may <u>not</u> need detailed health information or social security numbers.





Environmental Services colleagues need to know when a patient is being discharged so they can plan when to clean the room.

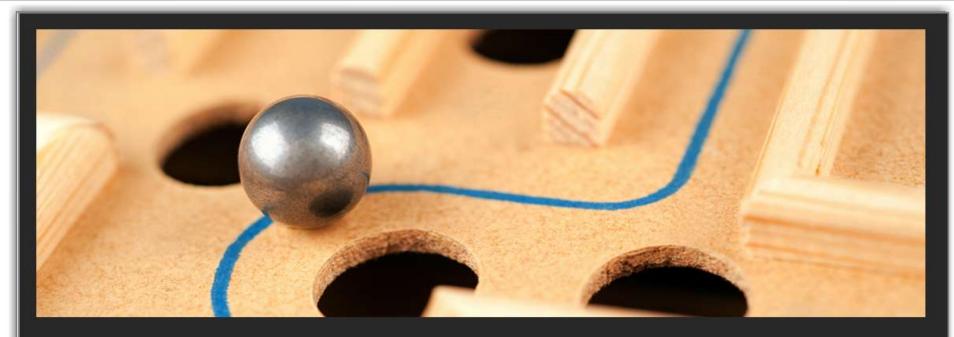
They do not need to know where the patient is going or why.





Now that you understand the foundational aspects of our Compliance Program, the next section will present you with situations you may encounter in real life.





Compliance Challenges

Regardless of where you work in the organization, you may encounter scenarios that result in risk to Aspirus, such as:

- · Observing poor quality patient care.
- · Billing the incorrect insurance plan.
- Disclosing confidential information to the wrong individual.
- Exposing patients to contaminants because a patient care area was not thoroughly cleaned.
- Hiring an individual that has been excluded from participating in federal health care programs.
- Paying a referring physician in excess of fair market value.

Even if you don't feel like you work in a highly-sensitive role or high risk environment, you can find yourself faced with compliance challenges.



Compliance Challenge 1

Can I access my electronic medical record (EMR) to send and receive messages regarding my care to my provider through an Epic In-Basket message?

Can I access my own EMR?



Compliance Challenge 1

Sending an Epic In-Basket message is considered accessing your own electronic medical record and violates the Aspirus Confidentiality Policy.

When you access and request information regarding your own patient care, your role changes to that of a patient and is no longer a job-related function.

Any activity within Epic that is not for your job-related function is an inappropriate use of the system and is potentially a violation of the HIPAA "Minimum Necessary" standards.



Compliance Challenge 1

Employees frequently struggle with boundaries between being an employee versus being a patient.

Please follow the same process as our other patients - sign up for the patient portal (MyAspirus) or contact the provider directly.



Compliance Challenge 2

I need to make sure that my address was changed in EPIC.

Is it okay to access my own electronic medical record if I am not accessing clinical data?



Compliance Challenge 2

No.

In accordance with the Confidentiality Policy, employees are not authorized to access their health records using Epic or any other electronic medical record system.

As a patient and employee, Aspirus policy must be followed to obtain your personal health record.



Compliance Challenge 3

A former patient recently requested to be my "friend" on social media.

Is it acceptable to be a "friend" of a former patient on social media?



Compliance Challenge 3

As caregivers, we are responsible for establishing and maintaining professional boundaries.

Because you know this person as a former patient, best practice would be to keep your personal life and your professional life separate.



Compliance Challenge 4

You are tagged by a deceased patient's family in a prayer chain on social media. You "liked" the post and then commented "I am going to miss seeing this kind soul in the ICU".

Is this an acceptable comment?



Compliance Challenge 4

Even a well-intentioned comment can connect a patient to Aspirus. In connecting this patient to Aspirus, it can potentially lead to a privacy violation.

At Aspirus, we discourage social media posts that involve our patients.



Compliance Challenge 5

Is it OK to access patient lists in another area or department (ex. ED Tracker Board)? I work on another unit and want to see how busy they are right now.



Compliance Challenge 5

It is not appropriate to be accessing Epic without a work-related reason.

Recognizing a patient's name and accessing the chart to see why they are in the hospital is for personal curiosity and is not a work-related reason. This can potentially result in a privacy violation.



Compliance Challenge 6

A nurse is coming off shift and posts a comment on social media about the heartbreaking outcome of one of their patients. They are careful to leave out the patient's name, location, and other identifiers.

Later, the nurse is alerted of a recent comment from a social media "friend" who could identify the patient by the description of the event. They are upset because the patient was their sibling.

Did the nurse take reasonable measures to de-identify the patient?



Compliance Challenge 6

The HIPAA Privacy Rule considers protected health information to be de-identified when there has been removal of 18 identifiers (e.g., names, addresses, dates, medical record number, photograph, etc.).

However, when the information can be used alone or in combination with other information to identify an individual, it would still be considered protected health information.

In this social media post, the information was descriptive enough for someone to identify the patient. This represents a privacy violation.



Compliance Challenge 7

I overheard my coworkers discussing a patient who was discharged yesterday.

They were talking about the patient being recently divorced and how their ex-partner was now dating somebody else already.

Is this discussion appropriate?



Compliance Challenge 7

The only time it is appropriate to discuss patients is when it pertains to the patient's care, and it should be done in a private setting.

In this case discussing the patient's marital status is not related to their treatment.

Rumors and disrespectful comments can spread misinformation. It can also be over-heard and reflect a negative image of the staff and Aspirus.





Drug Diversion

Drug Diversion - Definition

Drug Diversion is "intentionally and without proper authorization, using or taking possession of a prescription medication or medical gas from Aspirus supplies, Aspirus patients, or through the use of Aspirus prescription, ordering, or dispensing systems."

Examples of drug diversion include:

- · Medication theft
- Using or taking possession of a medication without a valid order or prescription
- · Forging or inappropriately modifying a prescription
- Using or taking possession of medication waste, i.e., left over medication
- · Inhalation of anesthesia gases



Drug Diversion - Clues

You may suspect drug diversion when a staff member has changes in behavior, mood swings, or heightened moments of excitement or irritability.

They may show signs of impairment such as sleepiness, poor cognition, sweating, or reddened eyes.



Drug Diversion - Clues

You may also suspect drug diversion if there are patterns of patients receiving the maximum amount of pain medication outside of their normal usage.

Alternatively, patterns of patient complaints of not getting pain medications or pain medications not working may suggest diversion.



Drug Diversion - Clues

And there are various other documentation patterns that may suggest drug diversion:

- · Medications given without a valid order
- Medications given more than 1 hour after removed from stock
- Waste amounts
- · Canceled entries
- · Missed documentation
- · Pain assessments not documented appropriately
- · Discrepancies in medication logs and inventory documentation



Drug Diversion - Clues

Employees who administer or who have access to controlled substances are required to review medication discrepancies.

Medication discrepancies should be resolved and documented within 24 hours of discovery.

If a discrepancy is unable to be resolved, a SafetyZone should be entered into the Patient Safety Portal under Medication Events for further investigation.



Drug Diversion - Clues

Finally, there could be various physical clues, such as:

- · Medication packaging or IV bag appears to have been tampered with
- IV medications ending sooner than expected
- Missing medications or missing controlled substance keys

Consider this scenario...



Drug Diversion - Scenario

A nursing unit supervisor noticed some questionable nursing documentation for narcotic administration. They did not confront the nurse because this nurse is a top performer and is very well-liked.

A couple weeks later, another staff member reported the nurse to the Compliance Helpline for suspicious behavior in handling pain medications.

The investigation revealed that the supervisor had been aware of suspicious behavior but did not Speak Up.

Should the Supervisor receive corrective action?



Drug Diversion - Consequences

Yes.

The staff member was diverting narcotic medications for personal use and was dismissed and reported to the licensing authority.

The supervisor also received corrective action for not Speaking Up when the suspicious behavior was initially observed.



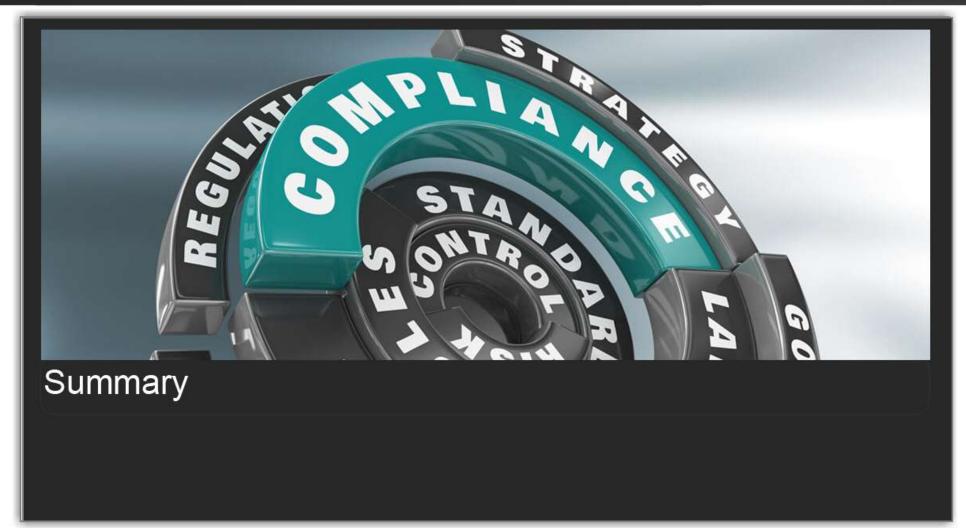
Drug Diversion - Reporting

Employees are required to report suspicion of drug diversion if there is knowledge of illegal drug activity or suspicions or signs of impairment.

Any employee who suspects that drug diversion has occurred should notify their immediate supervisor. If after business hours, the Supervisor/Manager/Director will follow procedures outlined in the Supervisor Checklist attachment to the Drug and Alcohol-Free Workplace Policy.

Alternatively, if there is no risk to patient safety and the employee is not comfortable notifying their immediate supervisor, the employee may call the Compliance Helpline (1-800-450-2339) to make a confidential report or enter a SafetyZone under the Compliance Portal.







Compliance is everyone's responsibility.

As an Aspirus employee, you are expected to:

- · Receive compliance training.
- Read and be familiar with the Code of Conduct.
- · Be familiar with the compliance risk areas.
- · Report suspected misconduct.
- · Seek guidance if you are not sure.





As a Supervisor or Manager, you are expected to:

- · Lead by example.
- Encourage employees to ask questions and report concerns.
- Consider compliance when evaluating and rewarding employees.
- Be familiar with compliance risk areas and create risk mitigation steps.
- Prevent, detect, and respond to compliance issues.





Remember - extraordinary teams act with integrity.

Nothing is more important to Aspirus than making sure we do what is right, and nothing puts us at risk more than failure to do so.

Thank you for your partnership and commitment to always doing the right thing.





Thank you so much for participating in this training.





Questions on the content of this training? Please contact compliance@aspirus.org.







