

 Samaritan Health 830 Washington Street Watertown, NY 13601	Enforcement of Standards		Document No. 3499
			Review Date: 2/18/2024
Effective Date: 2/23/2023	Approved by: Carman, Thomas		
Document Owner: Husenitza, Brandi			
Next Review Date: 2/18/2025			
Business Units:	Medical Center, Samaritan Home Health, Samaritan Keep Home, Samaritan Summit Village Assisted Living, Samaritan Summit Village Skilled Nursing, Centers and Clinics		

ENFORCEMENT OF STANDARDS; NON-EMPLOYMENT OF SANCTIONED INDIVIDUALS

This Corporate Compliance Enforcement of Standards; Non-Employment of Sanctioned Individuals Policy is applicable to Samaritan Medical Center and its Affiliates, Samaritan Keep Home, Samaritan Medical Practice, Samaritan Summit Village, and Samaritan Home Health (collectively, “Samaritan”).

PURPOSE:

To ensure that Affected Individuals (defined below) listed as debarred, excluded or otherwise ineligible for participation in Federal Health Care Programs by the Office of Inspector General (OIG) or New York State Office of Medicaid Inspector General (OMIG) are not employed by Samaritan. In addition, to ensure that Affected Individuals do not do business or contract with Samaritan if they have been listed as debarred, excluded or otherwise ineligible for participation in any Federal Health Care Programs; as well as to outline Affected Individuals’ good faith reporting obligations regarding concerns of non-compliance.

SUMMARY:

No Affected Individual, including any employee, agent or medical staff appointee of Samaritan, has any authority to act contrary to the provisions of the law, Samaritan’s Code of Conduct or policies applicable to standards of conduct, or to authorize, direct or condone violations by any other Affected Individual, employee, agent or medical staff appointee of Samaritan. No individuals who are debarred, excluded or otherwise ineligible for participation in any Federal Health Care Program will be hired, contracted with or associated with Samaritan. No individuals who have been convicted of health care related crimes will be allowed to occupy positions within the Samaritan organization unless expressly authorized by the Board of Trustees; and provided they are not listed as debarred or excluded. Affected Individuals have a duty to report, in good faith, any actual or suspected issues of non-compliant activity within the organization.

DEFINITIONS:

Affected Individuals - For the purpose of this policy, “Affected Individuals” refers to all persons affected by Samaritan’s risk areas, including employees, the chief executive officer of SMC and other senior administrators, managers, and contractors, agents, subcontractors, independent contractors (collectively “Contractors”), and governing body and corporate officers of Samaritan, as appropriate.

Exclusion Lists - Federal and state sanction lists that identify excluded, sanctioned, restricted, or debarred individuals or entities, including:

- System for Award Management (SAM), maintained by the General Services Administration (GSA) - The GSA maintains a current list of all entities debarred, suspended, proposed for debarment, excluded or disqualified under the non-procurement common rule, or otherwise declared ineligible from receiving federal contracts, certain subcontracts, and certain federal assistance and benefits.
- The New York State Office of Medicaid Inspector General (OMIG) List of Restricted and Excluded Providers - The list exists as notification that a person is excluded from the Medicaid program and for the purpose of preventing Medicaid payments for all care, services or supplies furnished, ordered, or prescribed by that person.
- The Department of Health and Human Services, Office of Inspector General (OIG) List of Excluded Individuals/Entities (LEIE) – The LEIE identifies all individuals and entities currently excluded from participation in Medicare, Medicaid and all other Federal Health Care Programs.

Federal Health Care Program - Any plan or program that provides health benefits, whether directly through insurance, or otherwise, which is funded directly, in whole or in part, by the United States government or a State health care program, including, without limitation, Medicare, Medicaid, and Tricare.

POLICY:

Samaritan will not employ, contract with, conduct business with, or otherwise affiliate with any individual or entity that has been convicted of a criminal offense related to health care, or is listed by OIG, OMIG and/or GSA as debarred, excluded or otherwise ineligible for participation in a Federal Health Care Program (“Ineligible Person or Entity”).

Any applicant for an employment or medical staff position with Samaritan is required to disclose whether the individual has ever been convicted of a health care related crime. In addition, Samaritan will make reasonable inquiry into the background of Affected Individuals, including conducting a review of the Exclusion Lists.

Affected Individuals are expected to act in accordance with the applicable provisions of applicable federal and state laws, rules and regulations, and in compliance with Samaritan’s policies, rules and regulations, including the Compliance Plan, Compliance Program and Code of Conduct.

PROCEDURE:

Exclusions

Samaritan's Human Resource department will conduct exclusion list screening prior to the hiring of, or affiliation with, Affected Individuals, including prospective employees and Contractors and vendors that are engaged in business or activity that, by its nature, may place Samaritan at risk for violation of the law or the Compliance Program, and at least every 30 days thereafter, to determine whether they have been (a) convicted of a criminal offense related to health care; or (b) listed by a federal or state agency as debarred, excluded, or otherwise ineligible for participation in Federal Health Care Program. As appropriate, Samaritan may conduct random exclusion list screenings of individuals or entities at any time. Samaritan also requires its Contractors to comply with these exclusion screening requirements.

If it is determined that any individual or entity currently or potentially affiliated with Samaritan is an Ineligible Person or Entity, the Chief Compliance Officer and other appropriate Compliance Department personnel will be promptly notified.

Additionally, pending the resolution of any criminal charges, or proposed debarment or exclusion from a Federal Health Care Program, any individual or entity that is charged with criminal offenses related to health care or proposed debarment or exclusion shall, be removed from direct responsibility for, or involvement in, any items or services payable by a Federal Health Care Program. If resolution results in conviction, debarment or exclusion of the individual or entity, Samaritan shall immediately terminate its employment of, or affiliation or contract with, such individual or entity until such time as the individual or entity provides clear evidence showing that the matter(s) leading up to appearance on such Exclusion List(s) have been resolved or the individual or entity no longer appears on the Exclusion List(s) and has been reinstated via the appropriate OIG or OMIG reinstatement process.

Reporting Obligations

Any Affected Individual who has knowledge of activities that he or she reasonably believes, in good faith, may violate the law, rules or regulations, executive orders, and any judicial or administrative decisions, rulings or orders, or that pose a substantial risk to the public health or safety, or violate Samaritan's policies, rules and regulations, including the Compliance Plan and Code of Conduct, must promptly report the matter to his or her immediate supervisor, the Chief Executive Officer or the Chief Compliance Officer, or as otherwise described in Samaritan's policy, *Reporting a Concern and the Investigation Process*. Affected Individuals are also expected to refuse to participate in any unethical or illegal conduct. Reports may be made anonymously and/or confidentially, and Affected Individuals will not be retaliated against or intimidated for reports made in good faith. Failure to report known violations, failure to assist in the resolution of compliance issues, or failure to refuse to participate in any unethical or illegal conduct, and knowingly making false reports shall be grounds for disciplinary action, including termination from or disassociation with Samaritan. Any reports of harassment or other workplace-related problems shall be referred to Human Resources.

Enforcement of Standards

Disciplinary standards are enforced fairly and consistently throughout all levels of personnel, and supervisory and management personnel may also be disciplined for failure to detect non-compliance with applicable policies, legal requirements and the Compliance Program where reasonable diligence on the part of the manager or supervisor would have led to the discovery of any violations or problems.

After a violation has been detected, Samaritan will take any reasonable steps necessary to respond appropriately and to prevent further similar violations, including any necessary modifications to its Compliance Program and policies and procedures to prevent, detect and correct systemic problems and violations of law, including non-compliance with Medicaid and Medicare requirements, as well as measures that prevent, detect and correct fraud waste and abuse. Additionally, the Chief Compliance Officer will make recommendations for appropriate corrective action to be taken with respect to persons involved in non-compliant activity and report investigation results to the Director of the department where the violation occurred, and, when appropriate, to the Compliance Oversight Committee, the Audit and Compliance Committee, and the Chief Executive Officer.

Samaritan has established various degrees of disciplinary actions to be taken in the event of non-compliance with intentional or reckless behavior being subject to more significant sanctions. If the investigation reveals an employee violated the law, Samaritan's Compliance Code of Conduct or applicable policies addressing standards of conduct, corrective action will be instituted in accordance with Samaritan's *Corrective Action* policy.

Violations by medical staff and allied health appointees will be reported to the Vice President of Medical Affairs for follow-up and corrective action will be instituted in accordance with the applicable entity's Medical Staff Bylaws, Rules and Regulations. Documentation of corrective action is included in the provider's Quality Assurance file for review at the time of reappointment.

Violations by Contractors, volunteers and other non-employees or non-medical staff appointees, will be evaluated on a case-by-case basis and may result in Samaritan discontinuing its relationship with the violator. Agreements with Contractors will include the right to terminate the agreement in the event of non-compliance with Samaritan's Compliance Program as it relates to the risk areas potentially affected by the Contractor.

With respect to violations by governing board members, disciplinary actions will be taken in accordance with the applicable bylaws of the entity.

Violations of the law will be reported to the appropriate governmental agency. Reports to the National Practitioner Data Bank, New York State Department of Health, Office of Professional Medical Conduct, Office of Professional Discipline, and New York State Education Department shall be made in accordance with requirements of the respective agencies or data bank.

RELATED POLICIES:

Corrective Action policy

Human Resource Workplace Harassment and Discrimination Prevention policy
Internal Reporting policy
Investigations of Possible Billing Compliance Issues
[Compliance Code of Conduct](#)

REFERENCES:

OMIG NYCRR §515.2, §515.3 and §515.7

OIG

U.S. General Services Administration

REVISED & REVIEWED: 1/7/2022; 2/20/2023