



# Compliance Challenges and Tips for American Indians and Alaskan Natives

(AI/AN)

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Office of Counsel to the Inspector General

Question One:



# Breadth of Knowledge

## Confederated Tribes of the Colville Reservation



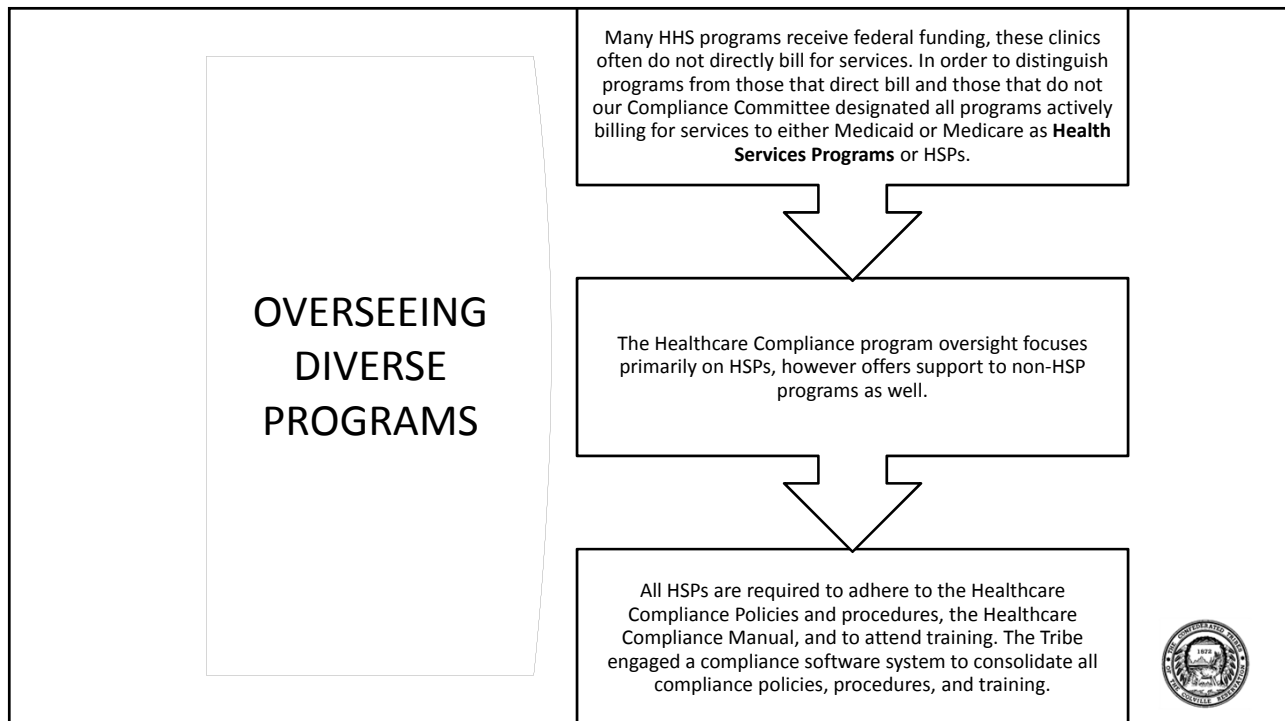
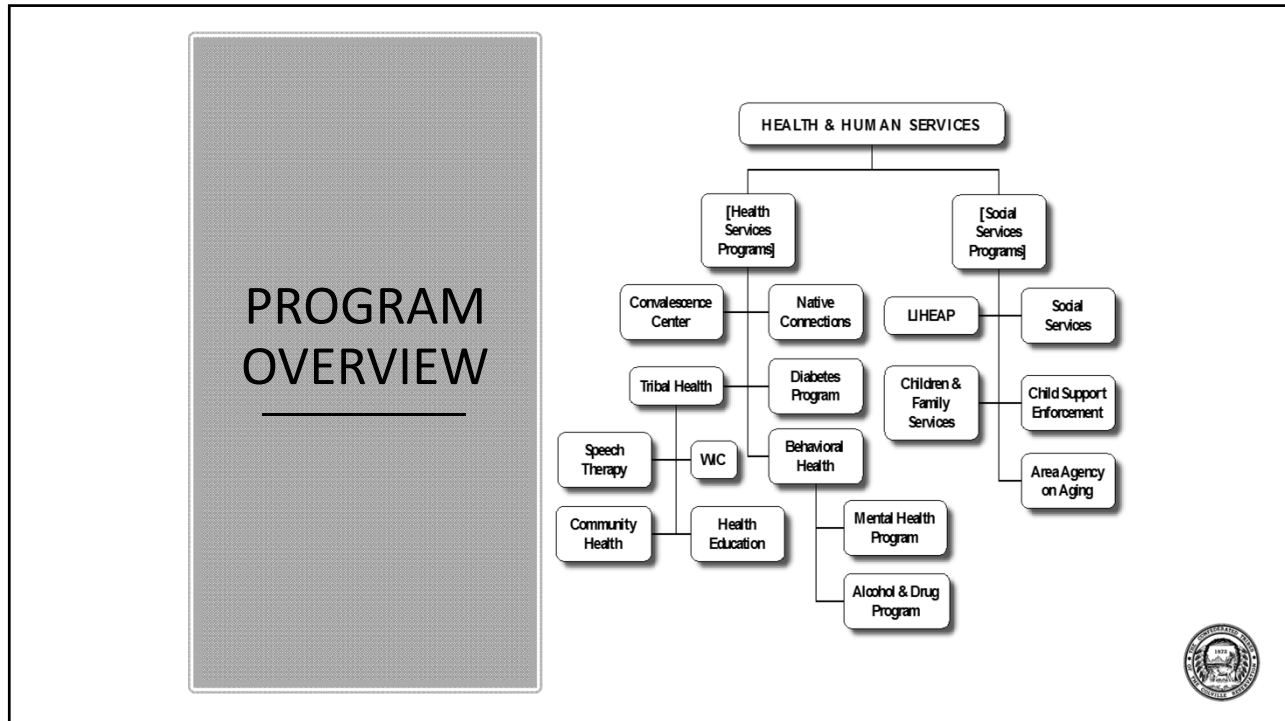
The present day members of the Colville Tribe are actually descendants of 12 smaller bands of distinct tribes forced to reside together on one reservation. The original bands all roamed the water ways of the Pacific Northwest hunting fishing, and gathering as far north as British Columbia and as far south as present day California.

- **Population:** The eighteenth-century Colville Indian population stood at roughly 2,000. Today there are nearly 10,000 tribal members.
- **Location** In the eighteenth century, the Colville Indians lived in northeastern Washington, around the Kettle and Columbia Rivers. Today, most live in Ferry and Okanogan Counties, and in nearby cities and towns.
- **Language** Colville Indians spoke a language from the Okanogan group of the Interior division of the Salish language family.




## History & Background of the Indian Health Services (IHS)

The **IHS** is the principal federal health care provider and health advocate for Indian people, and its goal is to raise their health status to the highest possible level. ... IHS Mission Statement is: *To raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level.* Indian Health Care services are offered to both reservation communities as well as Urban Indian populations. Funding from the Health and Human Services (HHS) is provided either through the agency itself or to the tribe to administer themselves under a 638 self governing structure.




**BRANDING**




**LEVERAGING COMPLIANCE**

**NEWSLETTERS**

**TRAINING**





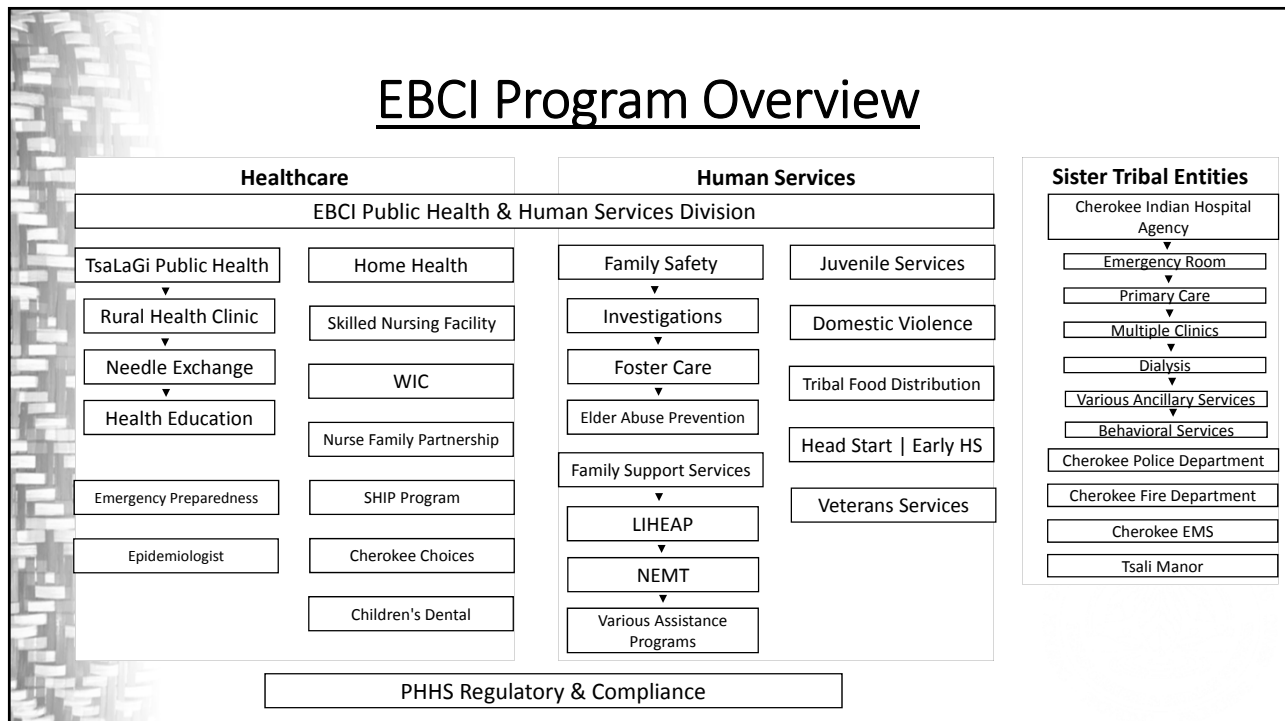
**CCT Healthcare Compliance** Qtr 1-2019

**Healthcare Compliance Newsletter**

Healthcare Compliance Newsletter

INSIDE THIS ISSUE:

Healthcare Compliance Newsletter 1    The Healthcare Compliance Newsletter is    key State and Federal changes. The basic



## Multi-Program Compliance?

Just a few of the granting, regulatory, and accrediting agencies we strive to comply with.



Compliance elements: risk management, consistency, laws adherence, process mitigation, regulations, guidelines, control.

## So How Do We Achieve Compliance

- **By keeping compliance at the forefront of the mission:**  
To ensure the EBCI Public Health and Human Services Division continues to provide excellent care through strategies and processes that promote employee safety, ethical behavior, high quality care, and compliance with applicable regulations.
- **By stressing that all employees have some responsibility for compliance:**  
Onboarding and compliance plan trainings clearly illustrate to each employee that they have their own specific responsibility for compliance.
- **By utilizing Compliance Ambassadors:**  
Ambassadors are front line employees who seek to advance their compliance knowledge and assist the Compliance Department with communication, supporting initiatives, and serving as a good role model for the organization.
- **By continuous education, agency list serves, and constant monitoring for regulatory updates:**
- **By building the work plan on a well-developed compliance risk assessment**
- **By building a solid compliance program based on the 7 elements and program accountability.**

## Operating an Effective Compliance Program:

[oig.hhs.gov/compliance/provider-compliance-training/files/OperatinganEffectiveComplianceProgramFinalBR508.pdf](http://oig.hhs.gov/compliance/provider-compliance-training/files/OperatinganEffectiveComplianceProgramFinalBR508.pdf)



**HEAT** PROVIDER COMPLIANCE TRAINING  
**TAKE THE INITIATIVE.**  
*Cultivate a Culture of Compliance With Health Care Laws*

### Operating an Effective Compliance Program

- Policies and Procedures
  - Regularly review and update with department managers and Compliance Committee.
  - Assess whether they are tailored to the intended audience and their job functions.
  - Ensure they are written clearly.
  - Include “real-life” examples.

## Seven Fundamental Elements of a Compliance Program

1. Written policies and procedures
2. Compliance professionals
3. Effective training
4. Effective communication
5. Enforcement of standards
6. Internal monitoring
7. Prompt response



# Voluntary Tribal Compliance Agreement:



[oig.hhs.gov/fraud/cia/agreements/  
The\\_Confederated\\_Tribes\\_of\\_the\\_Colville\\_Reservation.pdf](http://oig.hhs.gov/fraud/cia/agreements/The_Confederated_Tribes_of_the_Colville_Reservation.pdf)

[oig.hhs.gov/newsroom/  
podcasts/](http://oig.hhs.gov/newsroom/podcasts/)



VOLUNTARY TRIBAL COMPLIANCE AGREEMENT  
BETWEEN THE  
OFFICE OF INSPECTOR GENERAL  
OF THE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
AND  
THE CONFEDERATED TRIBES OF THE COLVILLE RESERVATION

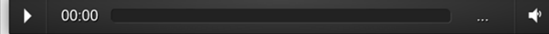
I. **PREAMBLE**

1. The Confederated Tribes of the Colville Reservation are a federally recognized, sovereign Indian Tribe, with Tribal offices located at Nespelem, Washington, on the Tribes' Reservation (the Tribes and the Reservation, respectively).
2. The Office of Inspector General (OIG) is an agency within the Department

### Voluntary Tribal Compliance Agreement

February 6, 2017

Andrea Treese Berlin, OIG senior counsel, is interviewed by Sheila Davis, a public affairs specialist in Washington DC.



- [Download the Podcast](#)
- [Read the Transcript](#)
- [Voluntary Tribal Compliance Agreement](#)
- [Tribal Alert \(Issued November 2014\)](#)

## Question Two:



# Tribal Counsel

## Keeping Executives and Tribal Leaders in the Know

- Health Board | Sub-committee of Tribal Council members and subject matter experts
- Community outreach
- One-on-one communication regarding programs services, rules, and eligibility.

### TRIBAL COUNCIL

There are four distinct districts on the CCT reservation. Each district elects officials who serve two year terms, conversely elections take place every year. The Colville Business Council has 14 members who oversee 12 separate committees.

The Council is the highest authority in the Tribe and approve tribal law and codes, however they regularly seek advice from attorneys and program administrators.

See right: HHS & ORA Org Chart Ex.





Look to Health Care Board Resources:  
oig.hhs.gov/compliance/compliance-resource-portal/index.asp



- Compliance
- Compliance Resource Portal
- Accountable Care Organizations
- Advisory Opinions
- Compliance Guidance
- Corporate Integrity Agreements
- Open Letters
- RAT-STATS
- Safe Harbor Regulations
- Self-Disclosure Information
- Special Fraud Alerts, Bulletins, and Other Guidance

### Compliance Resource Portal

Toolkits	+
Provider Compliance Resources and Training	+
Advisory Opinions	+
Voluntary Compliance and Exclusions Resources	+
Special Fraud Alerts, Other Guidance, and Safe Harbor Regulations	+
Resources for Health Care Boards	-
Resources for Physicians	+
Accountable Care Organizations	+



This is not intended to be a formal agency solicitation. OIG welcomes ideas for new compliance resources that would be helpful to the health care community and that are consistent with OIG's mission, in any format. The receipt of a suggestion does not obligate OIG to take action, including responding to the suggestion, making suggestions public, or issuing public guidance. Members of the public are required to follow all Federal health care program rules and regulations.

## Compliance Resource Portal

### Toolkits

- [Measuring Compliance Program Effectiveness: A Resource Guide](#)
- [Adverse Events Trigger Tools](#)
- [Toolkit for Health Care Boards](#)
- [OIG Toolkit to Identify Patients at Risk of Opioid Misuse](#)



Question Three:



# Tribal Law

## Tribal Council : Legislative Body : Sovereignty

- While it is possible for the council to make a law that contradicts the trends of federal, local, and state partners, it is very seldom they do so.
- With good communication, they understand the benefits of being able to leverage federal funding and the positive aspects of having good regulatory checks and balances.

### COMMON COMPLIANCE ISSUES WITH COUNCIL

Confidentiality

Lack of understanding or comprehension for program requirements

Council adds an additional line for administrative approval

Accepting the role of compliance & operations. The importance for compliance to maintain a certain level of authority



## VTCA

In January of 2017 the Colville Confederated Tribes of the Colville Reservation entered into a Title 1 Contract and Annual Funding Agreement, on a government-to-government basis to provide health and social services to tribal members and other eligible individuals. The agreement is called a Voluntary Tribal Compliance Agreement (VTCA), and is the principal reason the Tribe implemented a formal healthcare compliance program.



### COLVILLE TRIBES HEALTHCARE COMPLIANCE PROGRAM



- The tribes Healthcare Compliance Program consists of both a Compliance Manager as well as a Compliance Committee.
- The Compliance Manager reports to the Executive Director as well as the Colville Tribal Business Council.
- The Compliance Manager collaborates as a partner with any designated Health Service Program (HSP), to develop, implement and manage compliance within those programs. Together they ensure coordination with regulations, manage risks, ensure reporting channels, and approve compliance training.
- The compliance program also works to maintain conformity with the VTCA.

Question Four:



# Limited Resources

## HOW COMPLIANCE IMPACTS TRIBAL PROGRAMS

- On a very basic level compliance is about prevention, detection, collaboration and enforcement. It is a system of policies, procedures and processes developed to assure compliance with all applicable federal, state, and in our case, tribal laws governing the organization.
- Consequently the primary purpose most healthcare entities have adopted formal compliance programs is based on fear of financial, criminal or civil penalties.
- The Compliance Program works to ensure adherence to regulations in order to safeguard programs and to help sustain services.



## Compliance on a budget

- Understand the Core Compliance Elements
  - They are scalable to any organization.
- Utilize free resources: e.g., OIG website
- Utilize HCCA when possible
- Network with other compliance professionals

## OIG Free Resources:

- General
  - [OIG.HHS.GOV](http://OIG.HHS.GOV)
- Indian Health Services
  - [oig.hhs.gov/reports-and-publications/featured-topics/ih/](http://oig.hhs.gov/reports-and-publications/featured-topics/ih/)
- Opioid Issues
  - [oig.hhs.gov/reports-and-publications/featured-topics/opioids/](http://oig.hhs.gov/reports-and-publications/featured-topics/opioids/)
- Compliance, Generally
  - [oig.hhs.gov/compliance/compliance-resource-portal/index.asp](http://oig.hhs.gov/compliance/compliance-resource-portal/index.asp)
- Enforcement Issues
  - [oig.hhs.gov/fraud/enforcement/](http://oig.hhs.gov/fraud/enforcement/)
- Self Disclosures
  - [oig.hhs.gov/compliance/self-disclosure-info/index.asp](http://oig.hhs.gov/compliance/self-disclosure-info/index.asp)
- Grants Information
  - [oig.hhs.gov/fraud/grant/index.asp](http://oig.hhs.gov/fraud/grant/index.asp)
- OIG Alert
  - [oig.hhs.gov/compliance/alerts/guidance/20141124.pdf](http://oig.hhs.gov/compliance/alerts/guidance/20141124.pdf)



# General Information: OIG.HHS.GOV



U.S. Department of Health and Human Services  
**Office of Inspector General**

Search Report Fraud

About OIG Reports Fraud Compliance Exclusions Newsroom Careers

## Most Wanted Fugitives

Help us capture these healthcare fraud criminals

Learn More

### What's New

**February 21, 2019**  
Updated Civil Monetary Penalties and Alternative Exclusions

**February 20, 2019**  
CMS Improperly Paid Millions of Dollars for Skilled Nursing Facility Services When the Medicare 3-Day Inpatient Hospital Stay Requirement Was Not Met (A-05-16-00043)  
Comparison of Average Sales Prices and Average Manufacturer Prices: Results for the Third Quarter of 2018 (OEI-03-19-00030)  
Updated Corporate Integrity Agreement List

### Enforcement Actions

**February 25, 2019; U.S. Department of Justice**  
Southern California Pharmacy Owner Sentenced to Prison for Her Role in Health Care and Wire Fraud Scheme

**February 25, 2019; U.S. Department of Justice**  
Skyline Urology to Pay \$1.85 Million to Settle False Claims Act Allegations of Medicare Overbilling

**February 25, 2019; U.S. Attorney: Northern District of Oklahoma**  
North Carolina Marketer Agrees to Pay \$414,100.00 for Allegedly Engaging in Illegal Kickback Scheme with CK Compounding

### Most Shared This Week

- 1 CMS Improperly Paid Millions of Dollars for Skilled Nursing...
- 2 CMS Guidance to State Survey Agencies on Verifying Correction...
- 3 Massachusetts Did Not Comply With Federal and State Require...
- 4 CDC Reimbursed Contractors for Some Unallowable World Trade...
- 5 Opportunities Exist for the National Institutes of Health...

# Indian Health Service: oig.hhs.gov/reports-and-publications/featured-topics/ih/



REPORT FRAUD

U.S. Department of Health & Human Services  
**Office of Inspector General**  
U.S. Department of Health & Human Services

Report #, Topic, Keyword Search

About OIG Reports & Publications Fraud Compliance Exclusions Newsroom Careers

Home > Reports & Publications > Indian Health and Human Services

## Indian Health and Human Services

This webpage offers an overview of the Office of Inspector General's (OIG) body of work as it relates to the Indian health and human services.

Overview Reports Enforcement Resources

**Overview**

The Department of Health and Human Services (HHS) and its many agencies carry out health and human services programs for American Indians and Alaska Natives (AI/ANs) throughout the U.S.

The Indian Health Service (IHS), which has a budget of approximately \$5 billion, provides or funds a wide range of clinical, public health, and community services to approximately 2.2 million AI/ANs who are members of the 567 federally recognized Tribes located in 35 states, IHS and Tribal-run facilities generally also serve as Medicare and Medicaid providers for eligible AI/ANs.

Other HHS agencies provide tribal grants for human services programs ranging from Head Start to the Low Income Home Energy Assistance Program.

OIG provides oversight over all HHS federal health care programs and grant programs that serve AI/ANs—through audits, evaluations and investigations.

We are committed to helping protect the IHS programs in Indian Country from fraud, waste and abuse so that Tribal beneficiaries receive the health and human services that are so important to their well-being.

**I'm looking for**

Let's start by choosing a topic

Select One

**Eye on Oversight Video: Challenges in Indian Health Service Hospitals**

**Related Podcasts**

- Voluntary Tribal Compliance Agreement (February 6, 2017)
- Voluntary Tribal Compliance Agreement
- What is OIG's work in Indian Country? (August 11, 2016)

**Quick Fact**

Over 1.5 million people receive care from IHS facilities

# Opioid Issues: oig.hhs.gov/reports-and-publications/featured-topics/opioids/



U.S. Department of Health and Human Services  
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Reports & Publications

Featured Topics

- Unaccompanied Children
- Cybersecurity
- Emergency Response
- Combating the Opioid Epidemic
- Group Homes
- Affordable Care Act
- Reversers
- Drug Pricing and Reimbursement
- Home Health
- Hospital Compliance
- Reversers
- Indian Health and Human Services
- President's Emergency Plan for AIDS Relief (PEPFAR) Funds

## Combating the Opioid Epidemic

### OIG's Approach to Addressing the Opioid Epidemic

Addressing the opioid epidemic is a top priority for OIG. OIG's efforts fall in three areas:

1. [identifying opportunities to improve the efficiency and effectiveness of HHS programs;](#)
2. [identifying and holding accountable those engaged in fraud; and](#)
3. [empowering and collaborating with partners through data sharing and innovation.](#)

**Highlighted Reports**

- Opioid Use in Medicare Part D Remains Concerning**  
Read the Report
- TOOLKIT: Using Data Analytics to Compare Spend Levels and Identify Programs at Risk of Increased Overuse**  
Read the Toolkit

**Interactive Map**

States' Oversight of Opioid

# Compliance, Generally: oig.hhs.gov/compliance/compliance-resource-portal/index.asp



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**Office of Inspector General**

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## Compliance Resource Portal

Compliance

- Compliance Resource Portal
- Accountable Care Organizations
- Advisory Opinions
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Tools

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**Disclaimer**

These educational materials were current at the time they were

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**Webinars and Audio Podcasts**

- Webcast
- Presentation Materials
- Compliance Program Guidance
- RAT-STATS

**Advisory Opinions**

**Voluntary Compliance and Exclusions Resources**

**Special Fraud Alerts, Other Guidance, and Safe Harbor Regulations**

**Resources for Health Care Boards**

Email your suggestions for new OIG compliance resources

This is not intended to be a formal agency solicitation. OIG welcomes ideas for new compliance resources that would be helpful to the health care community and that are consistent with OIG's mission, in any format. The receipt of a suggestion does not obligate OIG to take action, including responding to the suggestion, making suggestions public, or issuing public guidance. Members of the public are required to follow all Federal health care program rules and regulations.

# Enforcement Issues: oig.hhs.gov/fraud/enforcement/



U.S. Department of Health and Human Services  
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**Fraud**

- Child Support Enforcement
- Consumer Alerts
- Contract Fraud
- Enforcement Actions**
- Fraud Risk Indicator
- Grant Fraud
- Medicaid Fraud Control Units
- Medicare Fraud Strike Force
- OIG Most Wanted Fugitives
- Report Fraud
- State False Claims Act Reviews
- Whistleblower Ombudsman

## Enforcement Actions

**Criminal and Civil Enforcement**

View the latest criminal and civil enforcement actions related to the Office of Inspector General's investigative and legal work. These cases often result from OIG's work as part of its Most Wanted Health Care Fugitives initiative, the Medicare Fraud Strike Force, and other similar efforts. Since this work culminates in legal action by the U.S. Department of Justice (DOJ), links are provided to relevant news releases issued by DOJ or one of their 93 U.S. Attorneys.

**State Enforcement Actions**

Medicaid Fraud Control Units (MFCU) investigate and prosecute Medicaid fraud as well as patient abuse and neglect in health care facilities. Currently, MFCUs operate in 49 States and in the District of Columbia. OIG certifies, and annually recertifies, each MFCU. OIG also collects information about MFCU operations, and assesses whether they comply with statutes, regulations, and OIG policy. View the latest enforcement actions from the States via links to the news releases issued by their Attorneys General or other appropriate State agency.

**Civil Monetary Penalties and Affirmative Exclusions**

The Office of Inspector General (OIG) has the authority to seek civil monetary penalties (CMPs), assessments, and exclusion against an individual or entity based on a wide variety of prohibited conduct.

**Corporate Integrity Agreement Enforcement**

The OIG has, as a contractual remedy, the right to impose stipulated penalties for non-compliance with the requirements of a Corporate Integrity Agreement (CIA). A material breach of the terms of the CIA also may result in the provider's exclusion from participation in the Federal health care programs.

# Self-Disclosure: oig.hhs.gov/compliance/self-disclosure-info/index.asp



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## Self-Disclosure Information

The Office of Inspector General (OIG) has several self-disclosure processes that can be used to report potential fraud in Department of Health and Human Services (HHS) programs. Choose the one that applies to you from the following descriptions to learn more.

**Self-disclosures should not be reported to the OIG Hotline.**

**Health Care Provider Self-Disclosures**

Health care providers, suppliers, or other individuals or entities subject to Civil Monetary Penalties can use the Provider Self-Disclosure Protocol, which was created in 1998, to voluntarily disclose self-discovered evidence of potential fraud. Self-disclosure gives providers the opportunity to avoid the costs and disruptions associated with a Government-directed investigation and civil or administrative litigation. Visit the [Provider Self-Disclosure Protocol](#) webpage for more information.

**HHS Contractor Self-Disclosures**

Contractors are individuals, businesses, or other legal entities that are awarded Government contracts, or subcontracts, to provide services to the Department of Health and Human Services (HHS). OIG's contractor self-disclosure program enables contractors to self-disclose potential violations of the False Claims Act and various Federal criminal laws involving fraud, conflict of interest, bribery or gratuity. This self-disclosure process is available for those entities with a Federal Acquisition Regulation-based contract. Visit the [Contractor Self-Disclosure](#) webpage for more information.

**HHS Grantee Self-Disclosures**

HHS grant recipients or subrecipients may disclose evidence of potential violations of Federal criminal law involving fraud, bribery, or gratuity violations, potentially affecting the Federal award. Federal regulation, 45 CFR 8.75.113, mandates disclosures of criminal offenses that non-Federal entities must make with respect to HHS grants. Recipients submitting disclosures in connection with this requirement should include the subject reference line "Mandatory Grant



Grants:  
[oig.hhs.gov/fraud/grant/index.asp](http://oig.hhs.gov/fraud/grant/index.asp)



U.S. Department of Health and Human Services  
**Office of Inspector General**

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- State False Claims Act Reviews
- Whistleblower Ombudsman

**Grant Fraud**

Small Business Innovation Research (SBIR) Fraud  
> The Small Business Innovation Research (SBIR) program provides seed money to domestic start-ups, and small businesses so they can develop new and advanced technologies across a wide array of industries. OIG has found instances of fraud and waste in HHS's SBIR program. In this Eye on Oversight, Operations Officer Francis Montoya describes two fraud cases involving millions in SBIR grant funds being diverted for personal use.

Hurricane Sandy Grant and Contract Guidance  
> Inspector General Daniel Levinson and OIG senior staff discuss grant and contract vulnerabilities related to Hurricane Sandy and how to minimize the risk of fraud, waste, and abuse in HHS grants.

Spread the Word: Fight Grant or Contract Fraud  
> This poster can help spread the word about grant or contract fraud and what you can do about it. To report fraud, waste, abuse, or mismanagement in HHS programs, use the OIG's Hotline.

Top Management Challenge: Protecting HHS Grants and Contract Funds from Fraud, Waste, and Abuse  
> Annually, the Office of Inspector General (OIG) prepares a summary of the most significant management and performance challenges facing the Department of Health and Human Services (HHS). In 2013, Management Challenge 9 highlighted the challenges related to grant and contract funding.

Spotlight On... Grants Management and Oversight  
> Did you know that the Department of Health and Human Services (HHS) is the largest non-mission organization in the Federal

OIG Alert:  
[oig.hhs.gov/compliance/alerts/guidance/20141124.pdf](http://oig.hhs.gov/compliance/alerts/guidance/20141124.pdf)



# OIG ALERT

Office of Inspector General  
330 Independence Ave., SW  
Washington, DC 20201  
News Media: (202) 619-0088

For Immediate Release  
November 24, 2014

## OIG Alerts Tribes and Tribal Organizations To Exercise Caution in Using Indian Self-Determination and Education Assistance Act Funds

Tribes<sup>1</sup> that enter into ISDEAA contracts and Title V Self-Governance compacts with IHS must protect IHS funds from misuse. Further, all tribes that receive Medicare, Medicaid, and Children's Health Insurance Program (CHIP) reimbursements must ensure that those funds are used in accordance with applicable Federal law, including the ISDEAA and the Indian Health

Question Five:



# Tribal Culture and History

## Cultural Impacts on Healthcare Services

- Cultural values of our patients shape the way we provide services.
  - Kinship
  - Sense of dignity
- Cultural traditions of the community require our healthcare systems to provide, and account for ancillary services.
  - Traditional medicines and therapies
  - Eligibility issues with who is provided for

INCORPORATING  
CULTURALLY  
CONGRUENT  
PRACTICES

Ensure practices are identified in the Medicaid State Plan as a service that is both of the following:

1. Covered by the agency
2. Performed by a health care professional within their scope of practice and the services must be included in the Core Provider Agreement



Question Six:



# Transportation/ Rural Setting

## Overcoming AI-AN Public Health Needs in Rural Settings

- **Find a voice and inform leaders who will advocate for tribal needs at all levels of government.**
- **Compliance role?**
- **Examples**
  - **Patient Transportation**
  - **Home Heating**

## ADDRESSING COMMON BARRIERS

Transportation: reservation wide transit system. Offering specific transport for various programs

Education: Coordination with Tribal Health Educators health promotion through things like health fairs and offering diseases specific resources

Insurance: Helping tribal members to sign up for Medicaid and Medicare



# Audience Questions?

Thank you for attending!

